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ROYAL COMMISSION OF INQUIRY INTO CERTAIN DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND RELATED MATTERS.

Hearing held 8th floor 180 Dundas Street West Toronto, Ontario

The Honourable Mr. Justice S.G.M. Grange

Commissioner

P.S.A. Lamek, Q.C.

Counsel

E.A. Cronk

Associate Counsel

Thomas Millar

Administrator

Transcript of evidence for

March 19, 1984

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ROYAL COMMISSION OF INQUIRY INTO CERTAIN DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND RELATED MATTERS. 2 3 Hearing held on the 8th Floor, 4 180 Dundas Street West, Toronto, Ontario, on Monday, the 19th 5 day of March, 1984. 6 7 THE HONOURABLE MR. JUSTICE S.G.M. GRANGE - Commissioner 8 THOMAS MILLAR - Administrator 9 MURRAY R. ELLIOT - Registrar 10 11 APPEARANCES: 12 P.S.A. LAMEK, O.C. Commission Counsel 13 Counsel for the Attorney D. HUNT 14 General and Solicitor General of Ontario (Crown Attorneys 15 and Coroner's Office) 16 Counsel for The Hospital for I.J. ROLAND Sick Children M. THOMSON R. BATTY 17 Counsel for The Metropolitan 18 B. PERCIVAL, Q.C. Toronto Police 19 Counsel for numerous Doctors K. CHOWN at The Hospital for Sick 20 Children 21 Counsel for the Registered F. KITELY Nurses' Association of Ontario and 35 Registered Nurses at 22 The Hospital for Sick Children 23 H. SOLOMON Counsel for The Ontario Registered Nursing Assistants 24

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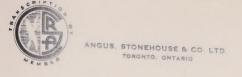
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1	APPEARANCES: (C	ont'd)
2		
3	D. BROWN	Counsel for Susan Nelles - Nurse
4	E. FORSTER	Counsel for Phyllis Trayner - Nurse
5	M. ROSENBERG	Counsel for Sui Scott -
6		
7		
8	B. KNAZAN	Counsel for Mrs. M. Christie - R.N.A.
9	S. LABOW	Counsel for Mr. & Mrs. Gosselin, Mr. & Mrs. Gionas, Mr. & Mrs.
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12	F.J. SHANAHAN	Counsel for Mr. & Mrs. Dominic Lombardo (parents of deceased
14		child Stephanie Lombardo); and Heather Dawson (mother of deceased child Amber Dawson)
15	W.W. TOBIAS	Counsel for Mr. & Mrs. Hines (parents of deceased child
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17	J. SHINEHOFT	Counsel for Lorie Pacsai and Kevin Garnet (parents of
18		deceased child Kevin Pacsai).
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INDEX OF WITNESSES Page No. SCOTT, Sui (Sworn) Direct Examination by Mr. Lamek INDEX OF EXHIBITS Description Page No. Chart showing nurses on duty when certain babies died. Inderal tablets, 10 milligram.



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--- Upon commencing at 10:00 a.m.

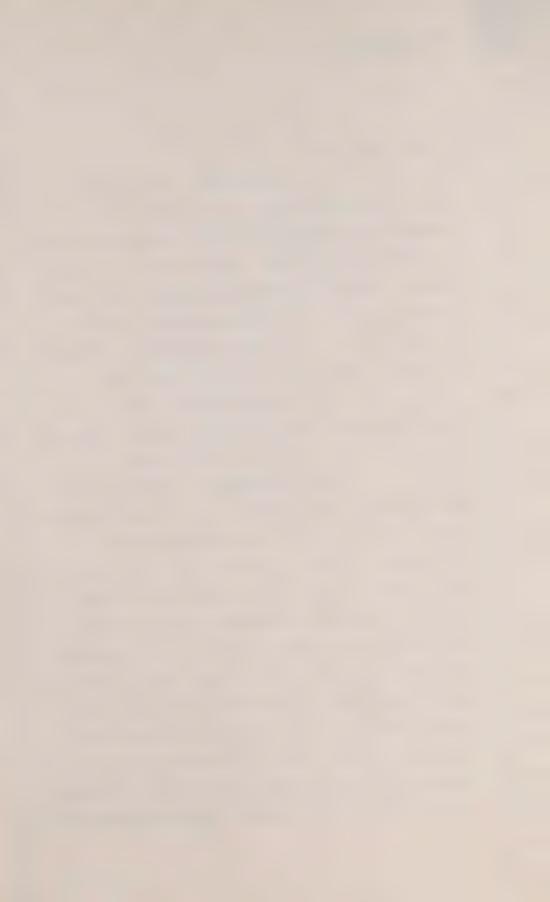
THE COMMISSIONER: I want to say something about next week. As you know the Court of Appeal are hearing the matter on Monday, and maybe

Tuesday of next week. But we have, as you will discover, serious accommodation problems and I want to make sure that we are finished with - I mustn't use that phrase, I must make sure that Mrs. Christie's evidence is completed by the end of that week.

Now I understand, Mr. Knazan, you are not concerned with the Court of Appeal, are you?

MR. KNAZAN: That's correct.

THE COMMISSIONER: And Miss Cronk will be leading Mrs. Christie. Now the only problem is with the rest of you, and obviously we can accommodate the Court of Appeal, I am quite sure they won't allow the matter to go longer than two days and we can accommodate everybody, but I would like you all to consider where you want to be, and whom you want to have where, and in what Court. I feel rasonably sure that at least the Monday Miss Cronk and Mr. Knazan will keep the witness occupied and there won't be any problem about that as long as somebody can start the cross-examination on Tuesday. Anyway, would you think about it and if anybody finds





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it is impossible let me know, as otherwise we will plan to start Mrs. Christie's evidence on Monday.

Yes, Mr. Lamek?

MR. LAMEK: Before I call the next witness, Mr. Commissioner, I understand Mr. Knazan has something he wants to say.

THE COMMISSIONER: Yes, all right. Yes, Mr. Knazan?

MR. KNAZAN: Mr. Commissioner, an article appeared in the Globe and Mail on Saturday, March the 17th, with a photograph of yourself.

THE COMMISSIONER: Not the most flattering.

MR. KNAZAN: One paragraph, after cataloguing supposed accusations against Mrs. Trayner, the writer states:

> "And she apparently is eager to defend herself against the accusations as are all the members of her nursing team."

In view of your repeated statements about wanting to maintain fairness in the press well as in the hearings, I would ask you to reiterate at this time that no one is accused of anything, and in the case of Mrs. Christie she is appearing as a





 voluntary not a subpoenaed witness. If she was accused of something her position might be different.

of course is accused of anything. I suppose I had better reiterate this even more strongly today than usual, because the Court of Appeal are going to consider this problem on Monday. Not only is no one accused of anything but I am not allowed to make an accusation against anyone. All I am allowed to do is make the findings of fact as to how, and by what means these children met their deaths. No accusation is being levelled against anyone, except maybe some photographers working for the Globe and Mail.

Yes, all right. Mr. Lamek?

MR. LAMEK: Mr. Commissioner,

Mr. Knazan is quite right, Mrs. Christie will be appearing as a voluntary witness who has not been subpoenaed, but it should be said the same is true of all the other members of the team, to the best of my knowledge nobody has required a subpoena to attend here yet.

THE COMMISSIONER: No. It is almost true, it is almost true, we did have one only to answer some American law.

MR. LAMEK: That's right.



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THE COMMISSIONER: And those were the very people that our subpoena wouldn't stretch to but they were the ones who insisted upon having it.

MR. LAMEK: After they arrived.

THE COMMISSIONER: After they arrived,

yes. No one has so far required a subpoena.

MR. LAMEK: May I call please the next witness, Mrs. Sui Scott?

THE COMMISSIONER: Yes, all right.

SUI SCOTT, Sworn

DIRECT EXAMINATION BY MR. LAMEK:

Q. Mrs. Scott, I understand that you were born and educated up to the high school graduation at least in Malaysia?

A. Yes.

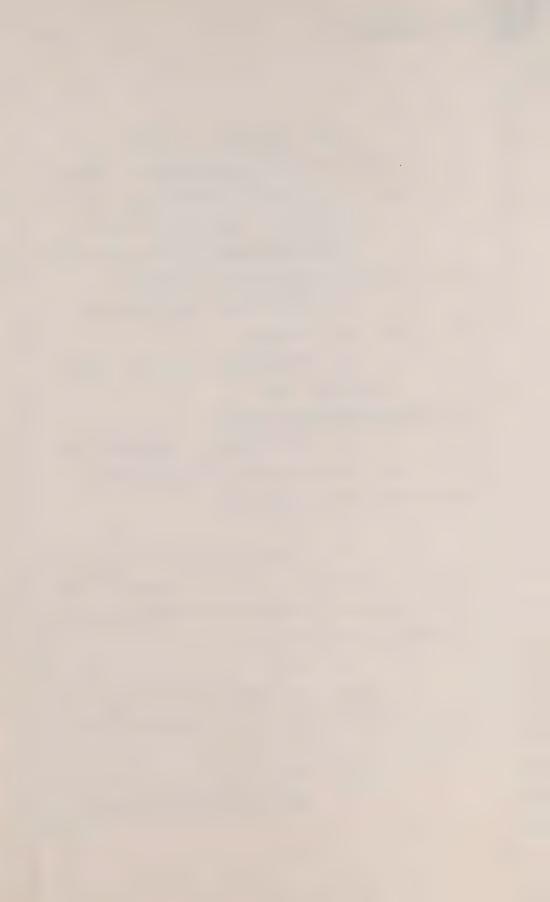
Q. And you then, as I understand it, went to England and in 1965 you enrolled in the School of Nursing at the Royal United Hospital in Bath, in Somerset, is that right?

A. Yes.

Q. You completed that course and received your qualifications as a Registered Nurse in 1968?

A. That's right.

And then you stayed, as I



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understand it, at that hospital as a graduate nurse for a short period of a month and then you married and moved with your husband to Hull in the north of England, did you not?

Yes.

And there you worked as a registered nurse at the General Hospital in Hull for approximately six months?

> A. Yes.

Q. Subsequently, in April of 1970, you came to Canada, originally to Montreal?

> A. Yes.

And in August, 1977, you moved to Toronto, do I have that correctly?

> A. Yes.

0. Now, you had not worked as a nurse since coming to Canada, had you?

> A. No.

Q. But after coming to Toronto you decided to get back into nursing and you took a refresher course and wrote the Registered Nurse's examinations and qualified to practise in Ontario as a Registered Nurse, in 1979 I think?

> A. Yes.

Q. You became employed at The



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Hospital for Sick Children in February of 1980?

A. Yes.

Q. From that time until now have you worked in The Hospital for Sick Children?

A. Yes.

Q And throughout the period have you worked in the Cardiology Services?

A. Yes.

Q. Other than some casual parttime employment, when you joined the staff at The Hospital for Sick Children, was that your first employment as a nurse in ten or eleven years?

A. Yes.

Q. Was it your first professional experience in a paediatric setting?

A. Yes.

Q. And was it your first experience of cardiology?

A. Yes.

Now, Mrs. Scott, we know that prior to April the 1st, 1980 the Cardiology Ward was Ward 5A on the 5th floor of the Hospital, was that where you started?

A. Yes.

Q. A few weeks after you joined the



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you joined?

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staff of the Hospital you moved I take it with everybody else in the Cardiology Service to Wards 4A and 4B on the 4th floor?

A. Yes.

Q. Can you recall, Mrs. Scott, when you first started on Ward 5A in February of 1980 of whose nursing team you were a member?

A. I don't recall.

Q. You can't remember that?

A. No.

Q. Do you remember whether you and Phyllis Trayner, then Phyllis Morrin, were members of the same team on 5A?

A. I don't know, when I joined she was away on holidays.

Q. She was away on holiday when

A. Yes.

Q. Did you work with Mrs. Trayner or Miss Morrin as she then was at all on the 5th floor, that you can now remember?

A. I think so, not all the time.

Q. What, occasional shifts?

A. Yes.

Q. Were you and Susan Nelles





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members of the same team on the 5th floor?

A. I don't recall.

Q. You don't recall that. Do you recall whether you worked at all with Miss Nelles while you were on the 5th floor?

A. I don't think so.

Q. You don't think so. Okay. Now when the Cardiology Service moved to Wards 4A and 4B, Miss Morrin, Mrs. Trayner, let's call her Mrs. Trayner and we know who we are referring to, Mrs. Trayner became a team leader you remember?

A. Yes.

Q. And did you then become a member of her team?

A. Yes.

Q. From the time of the move down to 4A/4B you were on Mrs. Trayner's team, were you?

A. That's right.

Q. And we know that Nurse Nelles joined that team a little later in the summer of 1980, is that your recollection too?

A. Yes.

Q. Can you tell me please, how did you and Miss Nelles get along, not just at the beginning when you first joined the team, but from the



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time she started to work with you until the time she left in March of 1981?

A. We got along fine.

Q. Did you find her a pleasant and easy person to work with?

A. Yes, she was very friendly.

 $\ensuremath{\mathfrak{Q}}$ Did you form the impression of her qualities as a nurse?

A. Yes, she was very efficient.

 $\ensuremath{\mathbb{Q}}$. Now I ask you, how did you and Mrs. Trayner get along from the time you began to work together?

A. We got along all right.

Q. Was your working relationship with Mrs. Trayner as satisfactory as your working relationship with Miss Nelles?

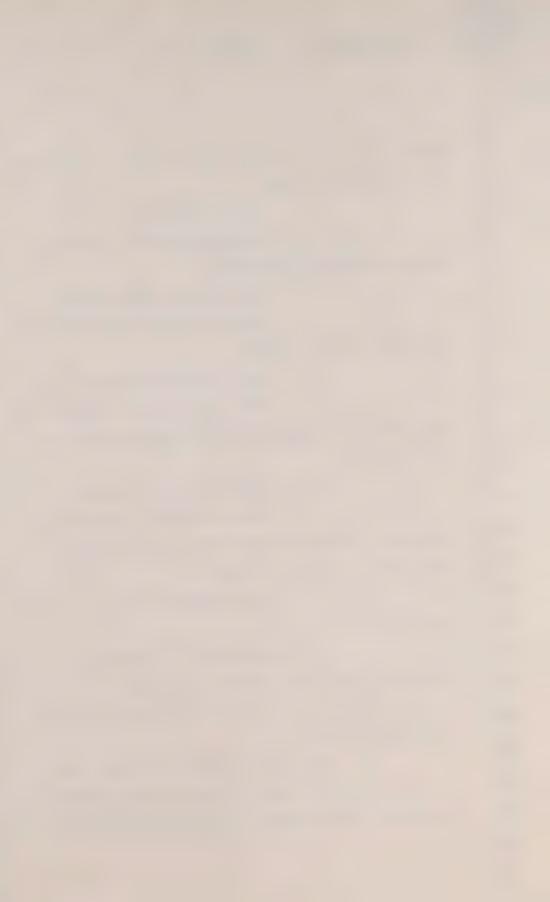
A. I would prefer to work with Susan Nelles.

THE COMMISSIONER: I am sorry, I missed that Mrs. Scott, what did you say?

THE WITNESS: I would prefer to work with Susan Nelles.

THE COMMISSIONER: All right, yes.

MR. LAMEK: Q. From your observations
Mrs. Scott, how did Mrs. Trayner and Miss Nelles



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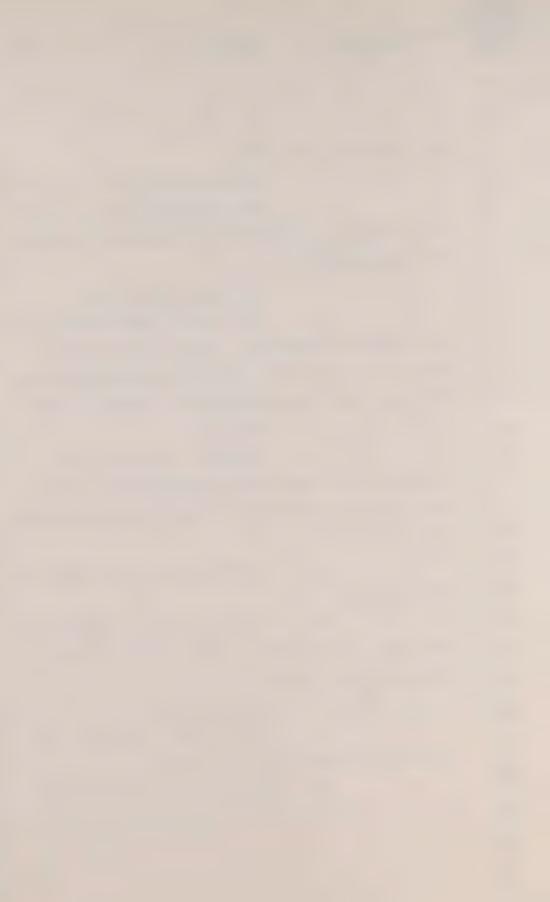
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get along with each other?

- A. They disagreed most of the time.
- Q. They disagreed most of the time.

Do you have any recollection of particular incidents of disagreement?

- A. No, there were so many.
- Q. Was it your observation that the disagreements between Mrs. Trayner and Miss Nelles continued from the time that they were members of the same team until Susan Nelles left in March of 1981?
 - A. Off and on.
- Q. Off and on. Were they more frequent in the early stages of the working relationship, or did they continue at about the same frequency throughout?
- A. I think they continued about the same frequency.
- Q. And again from your observation Mrs. Scott, how did other nurses on the floor get along with Miss Nelles?
 - A. They liked her.
- Q. And from your observation how did they get along with Mrs. Trayner?
- A. They were quite friendly with her.





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THE COMMISSIONER: I am sorry, I missed that again, what?

THE WITNESS: They were quite friendly with her, other than that I don't know.

THE COMMISSIONER: Yes, all right.

MR. LAMEK: Q. Now, Mrs. Scott, as you

know we are concerned with a number of deaths that occurred on the Cardiology wards between the very end of June 1980 until the end of the third week of March of 1981. I tell you I have had a chart prepared showing which nurses were present for which of the deaths with which we are concerned. I know you and I have discussed this before but I want to show it to you and perhaps we can explain it.



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those I think.

B EMT/cr

I tell you, first of all, Mrs. Scott, that I have not listed on this chart every child who died in that period. I have listed those who died in the period and were categorized by the authors of the Atlanta Report as having any measure of suspicion attaching to their deaths. That is to say the Atlanta categories A and B. You have seen

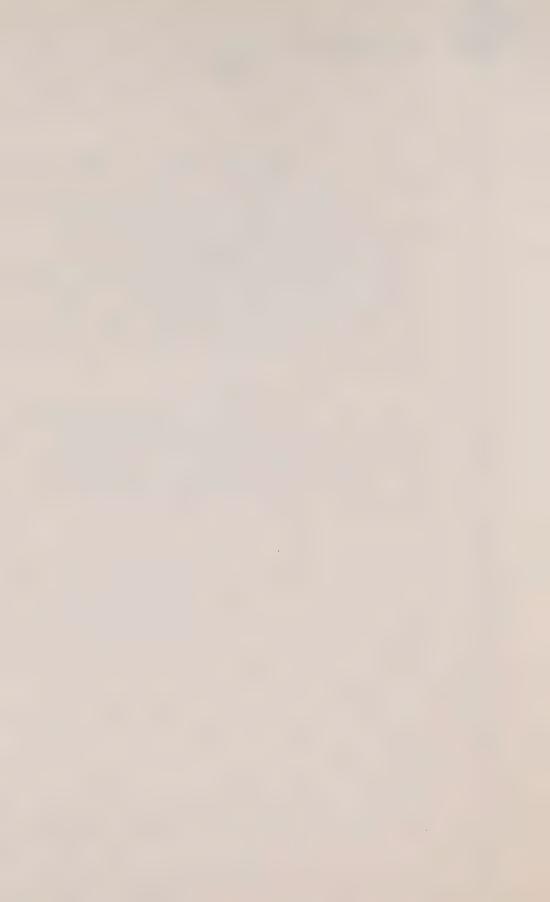
Yes.

Now on the left-hand side of the chart I have listed each of those children and there are some 29 of them with an indication as to whether the Atlanta Report categorized them as A or B deaths.

Then in the next column we have got the date and time of their deaths, and in the third column the ward upon which they either died or suffered an onset of critical symptoms and where it is known the room number in which the child was.

> A. Yes.

You will see right at the very top the Woodcock child. We don't know what room Woodcock was in, therefore we can't state that one. Similarly Taylor, the third child, we don't know the room, and with the case of Onofre, about half



way down, we think he was in Room 438, but we are not absolutely sure. But in other cases we have been able to get it either from the chart or from the assignment books.

Then across the top I have listed with

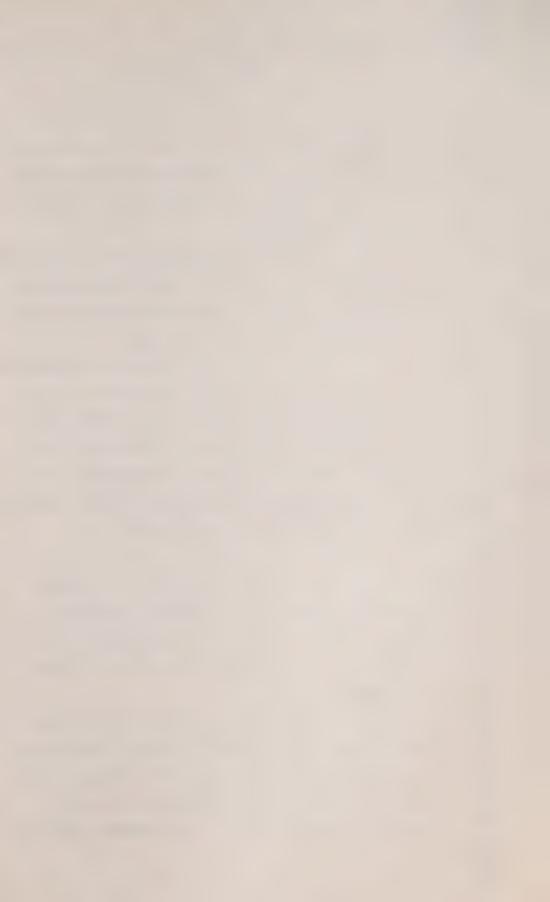
Then across the top I have listed with a column for each the more or less regular members of each of the 4A and 4B nursing teams that worked opposite each other at the same time.

Just so that we are sure we understand the initials, we have reading from left to right, Phyllis Trayner, Susan Nelles, yourself, Sui Scott, Mrs. Christie, Janet Brownless, Bertha Bell, Mrs. Bracewell, Yvonne Lyons, Mary Jean Halpenny, Debbie Harwood Jones, Shirly Parcels, Susan Reaper, Meredith Frise and Karen Power. Fair enough?

A. Yes.

Q. And then there is a blank column and whether we will use that for added starters or not I am not sure. And then finally there is a comment column and I will come to that in a moment.

Now from the legend at the top here what we have done is to mark with an X those nurses who are on duty on that particular ward upon which each child either died or suffered an onset of critical symptoms. So let's, for example, look at



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Taylor, the third one.

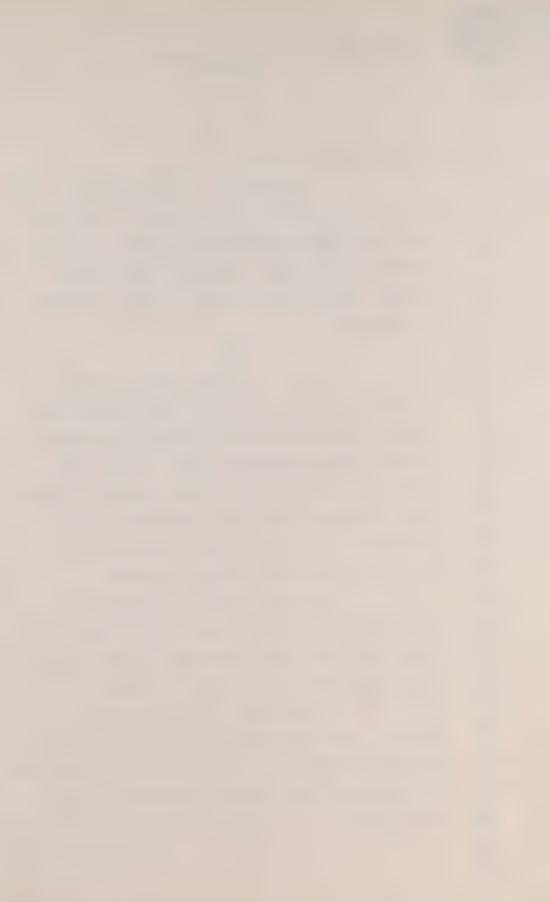
The nurses - he died on 4B as we see from the third column - the nurses on duty on 4B that night were Miss Bracewell, Yvonne Lyons and Shirley Ann Parcels. And on 4A there was Mrs. Trayner, Miss Nelles, yourself and Mrs. Christie. Is that clear?

> A. Yes.

0. And then we have attempted to identify from the charts or from the assignment books or from anything else that was available to us which nurse was caring for the child at the time that that child got into trouble, and that is marked with an asterisk. We haven't been able to do that with every child with absolute certainty, but to the best we can do it they are so marked.

And then finally in some of the squares under the nurses' names you will see a plus sign in the lower right hand side and that flags you to look over in the comment column.

For example, looking again at Taylor. Your name, your column has a plus sign in it, and if I look over to the right I see that from the assignment book you were relieving on Ward 8E. that night?





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Yes.
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Q. And similarly, Mrs. Christie
has a plus sign indicating a comment and she relieved
on 5C that night. And then there is an additional
comment that according to the chart Miss Bracewell
was in charge of Taylor. Is that right?

A. Yes.

Q. Now you have seen this chart before, have you not?

A. Yes.

Q. When you and I talked a few days ago, and you were good enough to look down the column under your own name, and can you tell me, please, to the best of your recollection does that accurately record your presence or absence from the ward at the times the children died?

A. Yes.

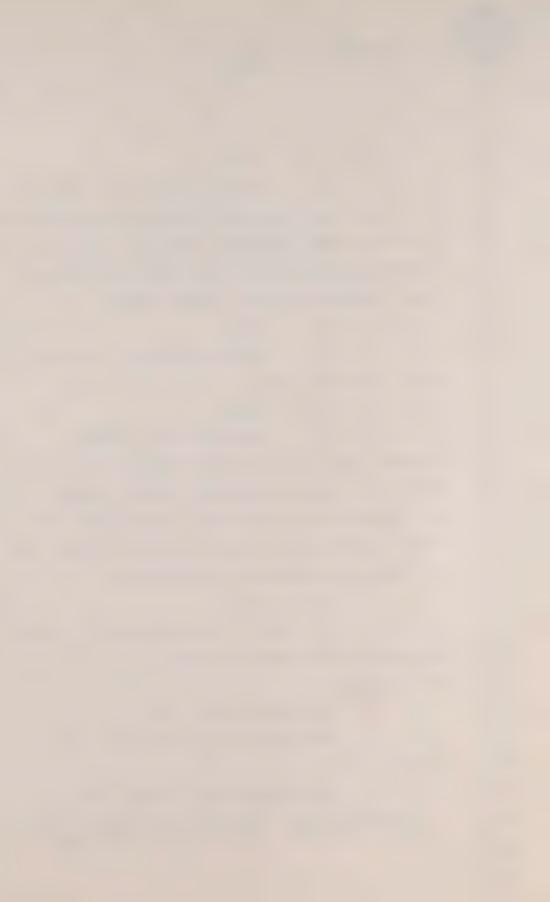
MR. LAMEK: Mr. Commissioner, I trust the rest of it is equally accurate. We have done our best to check it.

THE COMMISSIONER: Yes.

MR. LAMEK: May that be the next exhibit, please.

THE COMMISSIONER: Exhibit 383.

---EXHIBIT NO. 383: Chart showing nurses on duty when certain babies died.



Scott, dr.ex. (Lamek)

 $$\operatorname{MR}.$$ LAMEK: Q. I will leave that with you just in case we need to refer to it, Mrs. Scott.

A. Thank you.

THE COMMISSIONER: Have you got a spare copy of that?

MR. LAMEK: Yes, indeed.

THE COMMISSIONER: Just one - KP

stands for whom?

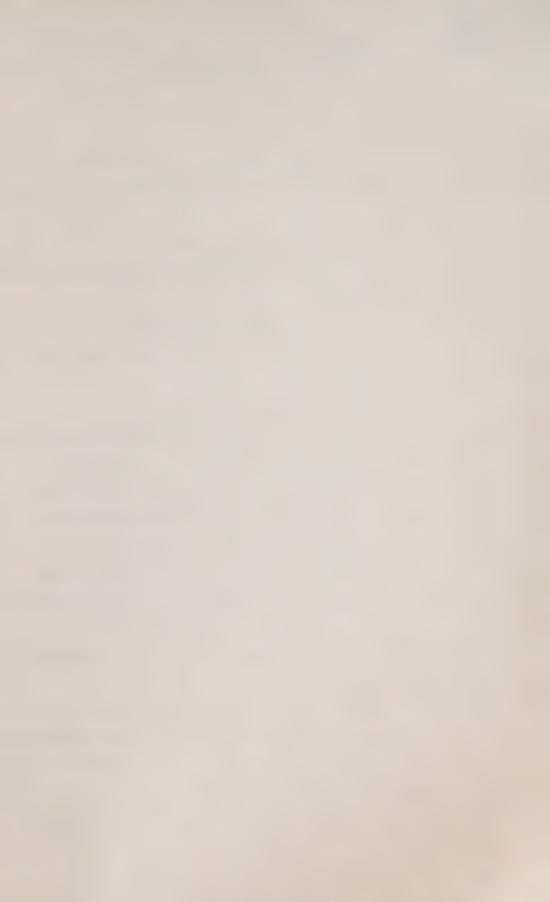
MR. LAMEK: Karen Power.

Q. Perhaps you could just look at one more example there to be sure that we all understand exactly what is set out on the chart,
Mrs. Scott. If you look at the Dawson child who is the fourth one listed. Amber Dawson. The chart discloses I believe that the child died at 2:40 in the morning of July 28th in Room 418 which is on Ward 4A. The nurses on duty that night on 4A were Phyllis Trayner, Susan Nelles, yourself,
Marianne Christie.

Susan Nelles from the asterisk was providing care for the child that night, and Marianne Christie we seen from the note column was being

shared with Ward 4B?

A. Yes.



And the nurses on 4B that

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night were Miss Bracewell, Miss Lyons and Miss Parcels. Is that right?

A. Yes.

Q. Good. Thank you.

Now from the chart, Mrs. Scott, it
appears that in the case of 17 of the deaths you
were on duty on the ward where the child either died or
suffered the onset of critical symptoms, and you
were on duty at the time but not on the ward in the
case of five of the deaths. Do I have that
correctly?

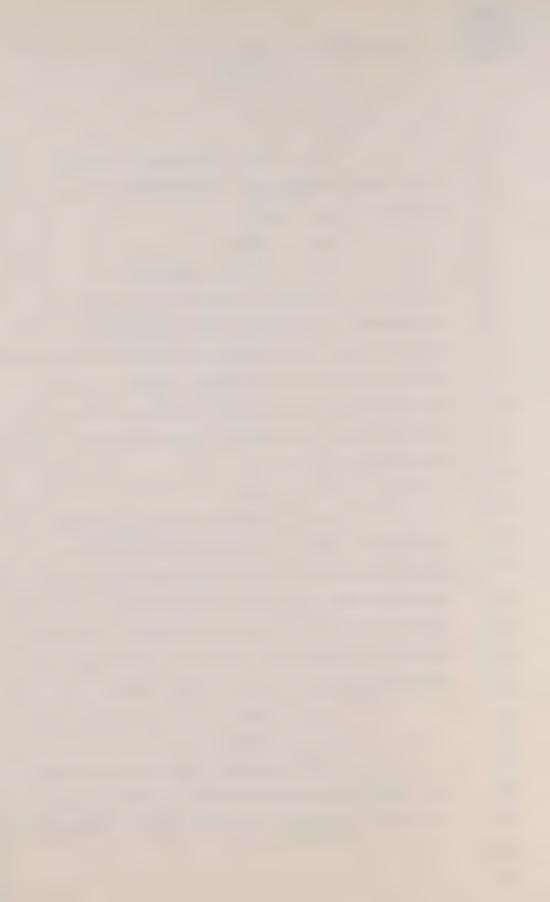
A. Yes.

Q. When I say not on the ward, although the note at the bottom says on duty on the opposite ward, it may be that you were on duty somewhere else in the Hospital relieving as, for example, you were in the case of Taylor. It is not that you were just not on the ward where he died; you were relieving on Ward 8E that night?

A. Yes.

Q. Okay.

Now it appears again from the chart, Mrs. Scott, that the first child for whose death you were on duty and on the same ward as the child



Scott, dr.ex. (Lamek)

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was Amber Dawson who died in the small hours of July 28th. Do I have that correctly?

A. Yes.

Q. Going back up to the top for a moment you had been on duty on Ward 4A the long night that Laura Woodcock got into trouble but she was on Ward 4B and she in fact died after your shift had gone off duty. Do you remember that?

She died at 9:40 in the morning and you had been on long nights on Ward 4A the night before?

A. Yes.

Q. Did you learn that Laura

Woodcock had died?

A. Yes, when I came back.

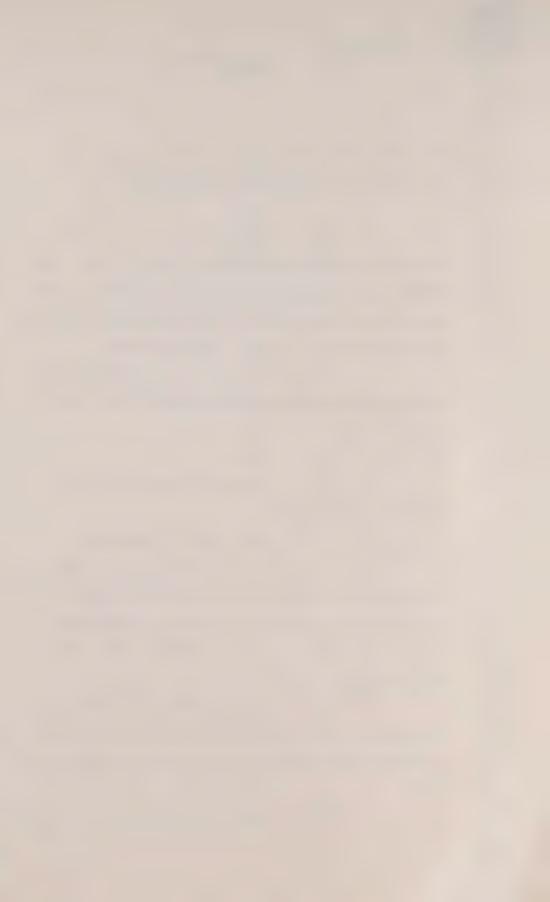
Q. Did you know enough about Baby Woodcock at that time to have any views as to whether her death was expected or unexpected?

A. I am afraid I don't know

her at all.

Q. Did you gain any impression from other nurses on the floor or from doctors as to whether her death was an expected or unexpected one?

A. No.



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Q. Now not listed on this chart but in fact next in order to die was a child as to whose death the authors of the Atlanta Report saw no element of suspicion; that is to say Alan Perreault. He died in the early afternoon of July 8th, and in fact you were on duty that afternoon with Mrs. Trayner, were you not? Can I assist you, if I need to, with the assignment books or the WIN sheets, but I tell you that my records show you were on duty the afternoon that Alan Perreault died. He is not on this chart.

Scott, dr.ex.

(Lamek)

No. A.

Do you remember Alan Perreault? 0.

A. . . No.

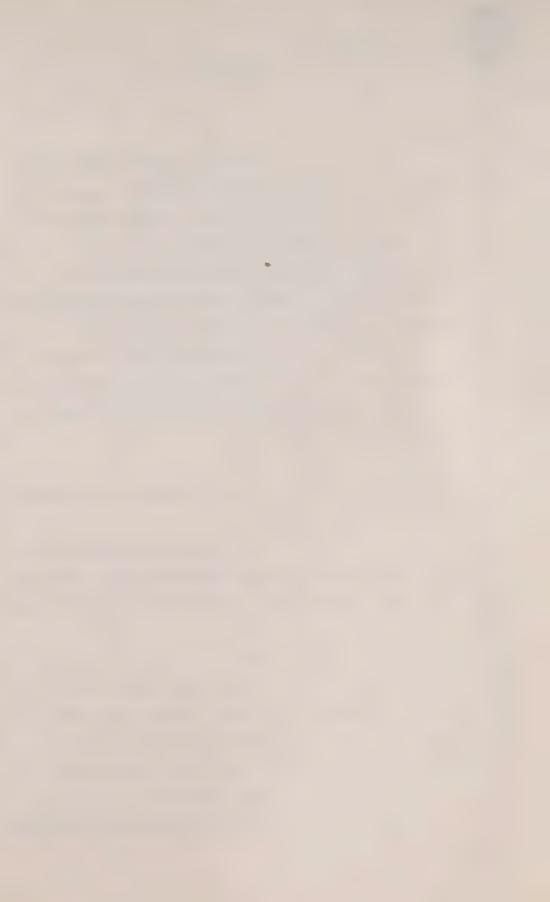
You were not assigned to care 0. for him according to the assignment book, I can tell you that, and you have no recollection of him I take it?

> Α. No.

And the next child to die is on 0. the chart and that was Baby Bilodeau, the early morning of July 22nd, but you were not on duty at all at the Hospital the night that child died?

> That is right. A.

Did you subsequently learn that Q.



TORONTO, ONTARIO

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he had died?

A. Yes.

Q. When was that?

A. When I came back.

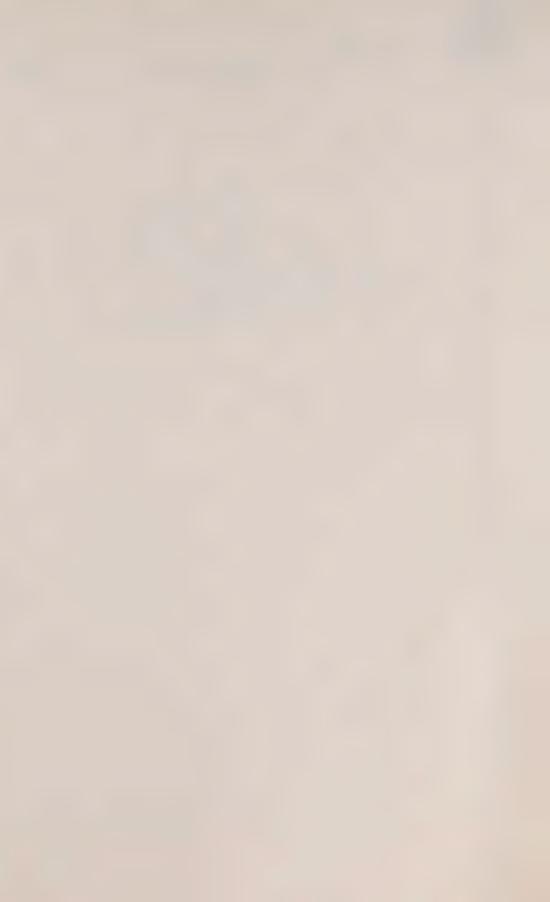
Scott, dr.ex.

(Lamek)

Had you had any contact with Q.

that child prior to his death?

I don't think so. A.



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O. All right. And did you have any basis for forming an opinion as to whether his death was expected or unexpected?

A. No.

O. All right. With respect to David Taylor, the next child on the chart, you were on duty that night but you were not working on the cardiology ward, as I understand it you were relieving on Ward 8E.

A. Yes.

O. I take it that is on the eighth floor of the hospital?

A. Yes.

Q. All right. Do you recall whether in the course of that long night shift you were on Ward 4A or 4B at all?

A. No, I wasn't there.

Q. You were not there.

A. No.

Q. Did you similarly learn of

David Taylor's death?

A. Yes, I did.

O. At the end of that shift or on a subsequent shift, do you remember?

A. Not at the end of that shift.





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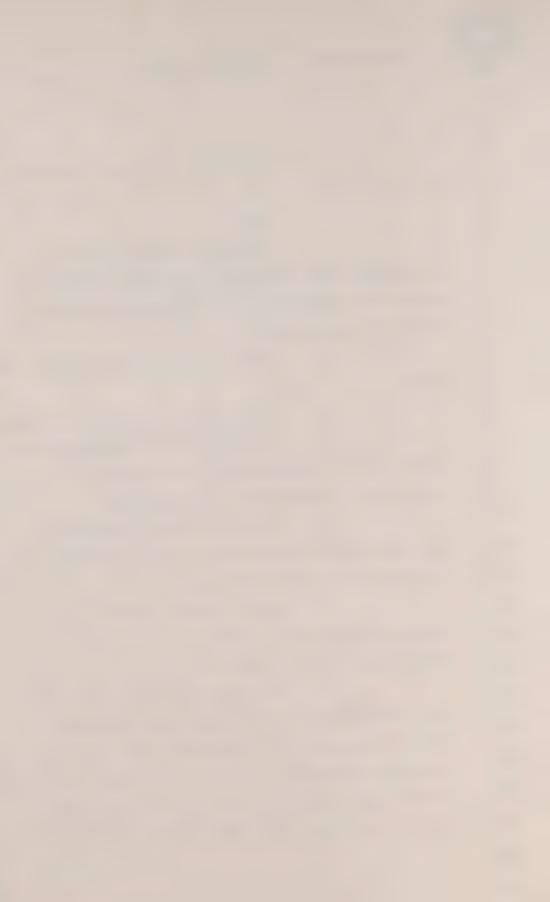
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			Q.	All	right.	When	you	were	next
on	the	ward?							

- A. Yes.
- O. Similarly, did you have any information about the Taylor child which enabled you to form any impression as to whether his death was expected or unexpected?
- A. Later we were told but not at that time.
 - Q. Later you were told what by whom?
- A. No, later we were told about the condition of all the children that had died but not at that time, immediately after his death.
- O. Was that the only information that you ever had upon which to form any judgment as to whether his death was expected or not?
- A. Well, I don't have much experience, previous experience in cardiology, so, I don't have any basis to form any opinions.
- Q. All right. The very next night after Baby Taylor had died Amber Dawson had died and you were on duty on 4A when she died, although you were not assigned to care for that child that night. Prior to the night of her death, that's the night of July 27th to 28th, Mrs. Scott, prior to that had you





had any contact with Baby Dawson; she had been in the hospital since the 23rd of July.

A. I had looked after her before but not that night. Q. Not I think within the 48 hours

preceding her death.

Α. No.

and death in the early morning of July 28th? A. No, I don't think I was in the room when she took a turn for the worst.

tion of the events leading up to her cardiac arrest

Q. All right. Do you have any recollec-

Q. Were you present at the resuscita-

Α. Yes.

tion effort?

that though?

that resuscitation effort and what you were doing? A. I think most probably I was help-

ing drawing of the drug.

You say most probably. 0.

Α. Yes.

0. Do you have any recollection of

O. Do you have any recollection of

No. A.

> Fine. And no clear recollection 0.

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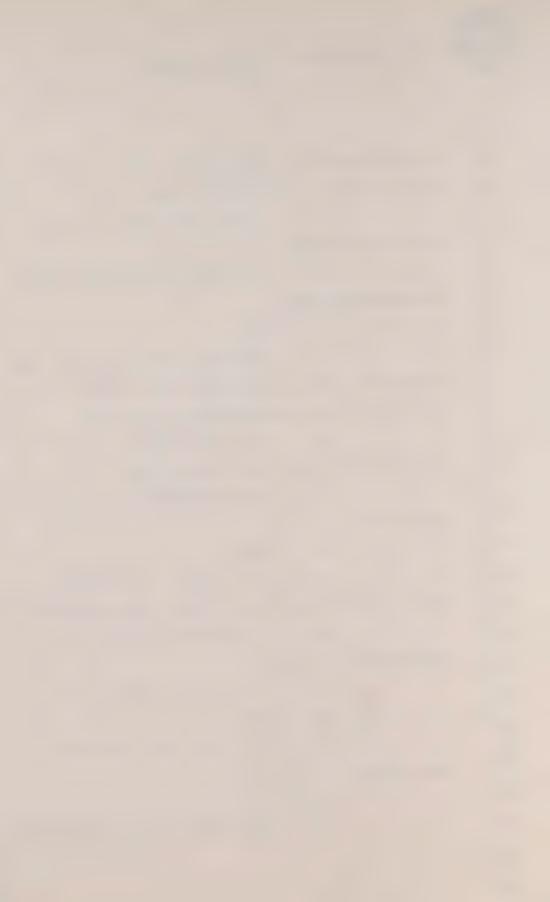
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I take it from what you have said of the child or of the circumstances of her death.

A. No.

Q. Okay. Now, three nights later you were again on duty on Ward 4A when Lillian Hoos died on that ward. Once again, the child had not been assigned to you for nursing care that night.

She had been in the hospital since July 16th. Do you recall whether you had cared for her at all since the time of her admission?

A. I don't recall; maybe once or twice.

O. All right. Certainly I can suggest to you, Mrs. Scott, from my research of the matter that you had not cared for her within the 48 hours preceding her death, is that your recollection?

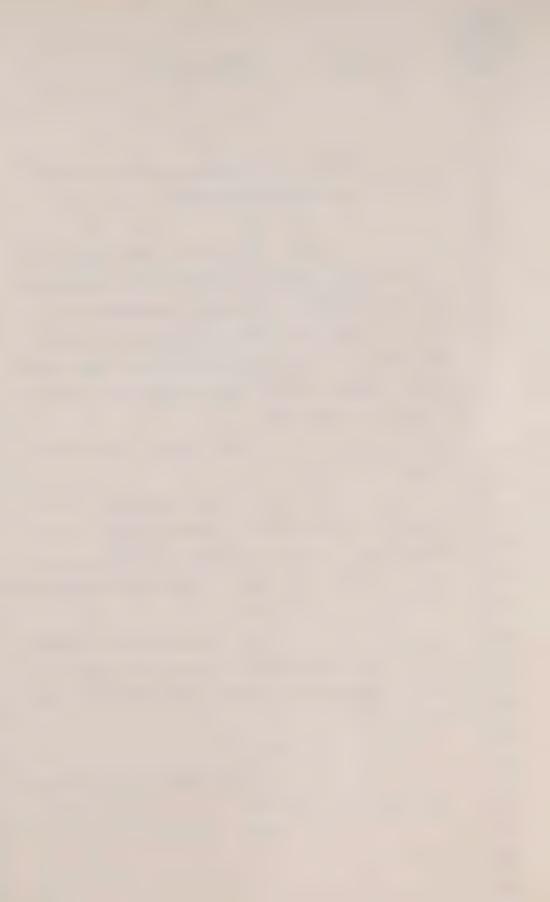
A. Yes.

Q. Okay. Do you have any recollection of the events leading to the arrest and the death of Lillian Hoos in the early morning of July 31st?

A. No.

Q. Were you present at the resuscitation effort on that child?

A. Yes.



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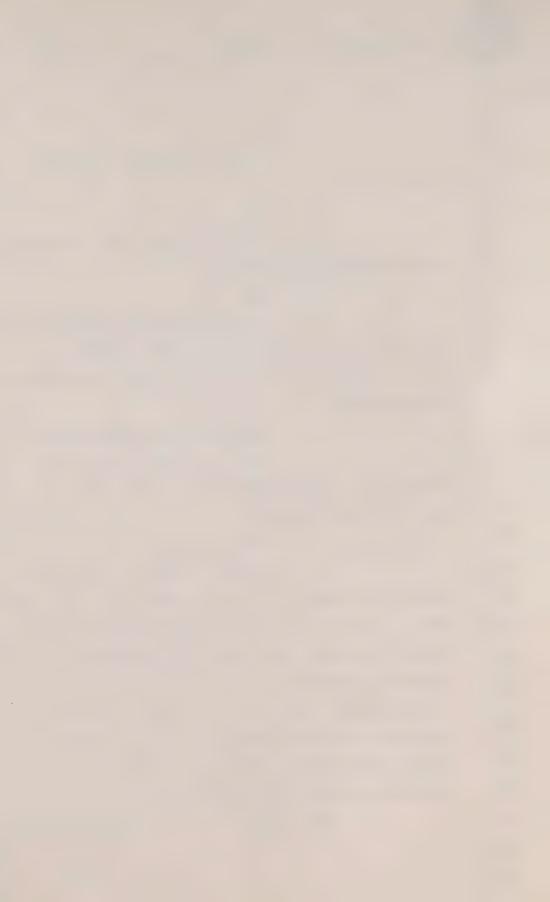
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- O. Do you recall what you were
 - A. No.
- Q. Do you have any other recollection of the resuscitation effort?
 - A. No.
- Q. Did you derive any impression from the reactions of others on the floor, doctors or nurses, as to whether that child's death was expected or unexpected?
 - A. Immediately after her death?
 - O. Well, let's start there, yes,

immediately after her death, did you subsequently gain any such impression?

- A. I don't recall.
- Q. You don't recall. Well, let's pause there because we've got to the end of July, Mrs. Scott. In the period from June 30th until July 31st six children had died on the cardiology ward; five listed on the chart plus Alan Perreault. At the end of July did you have sufficient experience of the pediatric cardiology service to have any view as to whether that was an unusually large number of deaths in the period of a month?

A. No.



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O. Certainly I take it it was rather more deaths than you had been seeing in the period from February when you joined until the end of June.

> Α. Yes.

Did you ask anybody whether the number of deaths that had occurred in the course of the month was an unusually large number?

A. Well, we talked about it and it was in the middle of August or towards the end of August we were told by the doctors that it was not our fault that the babies were very sick, it had something to do with their anatomies and we had done the best we could.

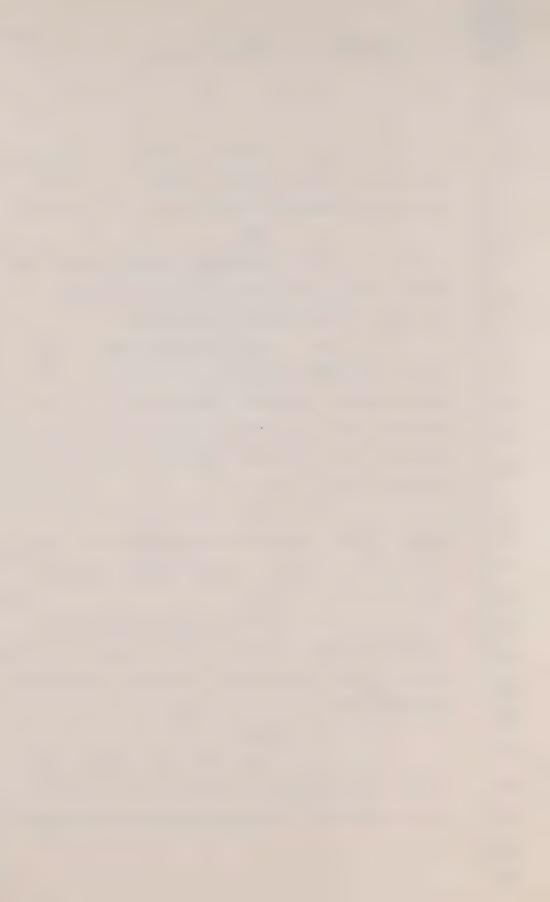
O. Okay. And that was into August. Do you remember any discussion at the end of July as to the number of deaths that had occurred?

No.

Did you have any impression from others on the floor, doctors or nurses, at the end of July, that a surprisingly large number of children had died on the ward in that month?

No.

Okay. Were you aware however 0. at the end of July that all of the children who had died on the wards in that month had died or suffered an



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TORONTO, ONTARIO

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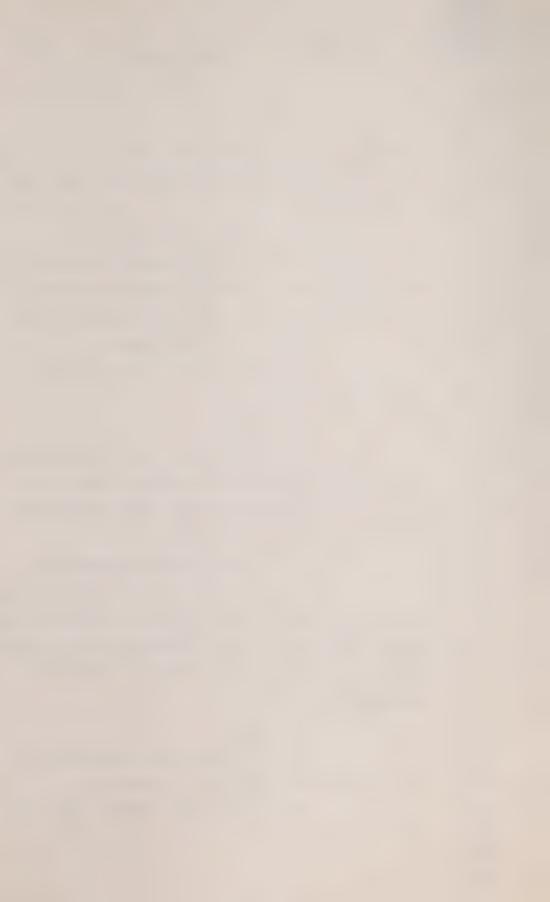
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onset of terminal symptoms when your team was on duty; not necessarily you personally but your team, were you aware of that?

- Not at that time.
- Were you aware at the end of July that of the six who had died as of June 30th four had died between the hours of 2 and 3:30 a.m.?
 - Α. Not at that time.
- That hadn't registered as an element in these?
 - No.
- And do you recall any discussion as to whether anyone had observed that four out of the six children had died in the small hours of the morning, as of the end of July?
 - I don't think anybody did.
- All right. Well, let's move into August, Mrs. Scott. On August 1st, the very night after Lillian Hoos had died, you were again on duty I think. Would it be helpful to you to have the WIN sheets available?
 - Yes. Α.
- Would it, okay. I wonder if I can borrow the exhibit copy, please.

There you go, Mrs. Scott. That way I



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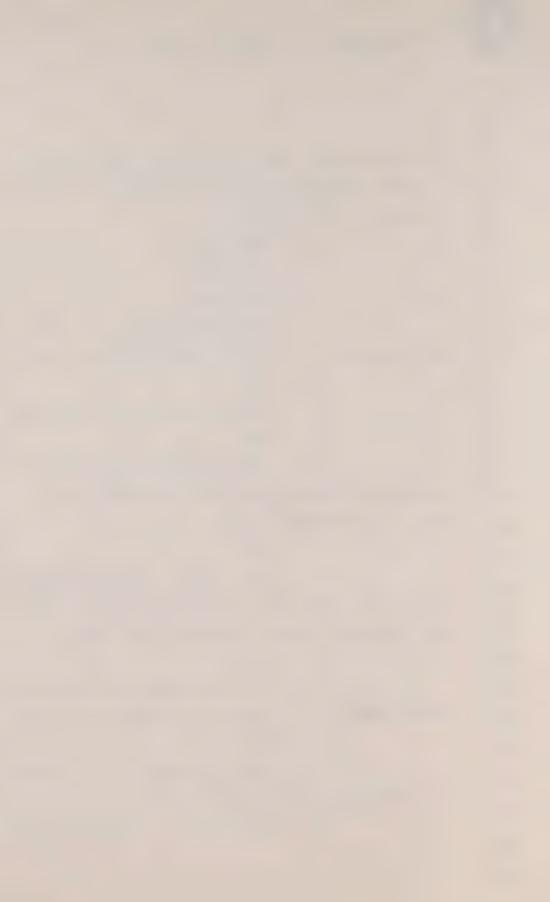
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can be sure that I am not misstating your presence. I believe you worked the long night shift of July 31 to August 1, did you not?

- A. What date?
- 0. I'm sorry?
- A. What date?
- 0. July 31 to August 1, the shift that started 7, 7:30 on the evening of July 31st.
 - Α. Yes.
 - 0. You were working the long night?
 - Α. Yes.
- And that was the night that a child called Phillip Turner got into trouble and died, do you remember that?
 - Α. Yes.
- Okay. Again, you weren't assigned to care for that child, it was Nurse Nelles' patient that night that you were working on the floor.
 - Α. Rìght.
- Do you have any recollection of the events leading up to that child's arrest and death?
 - Α. No.
- 0. Were you present at the resuscitation attempt on that child?
 - Yes. Α.





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TORONTO, ONTARIO

- O. Do you remember what you were
 - A. Tidying up.
- 0. You were tidying up. Is that after the resuscitation effort was over?
 - A. Yes.
- O. Do you remember what you were doing while the arrest team was actually working?
- A. I was setting up the cutdown tray and the I.V. solution.
- Q. Had you had any contact with Baby Turner prior to the night he died; I should tell you he came into the hospital on July 17th.
 - I don't recall. Α.
- Q. Okay. Certainly I see no indication that you had cared for him in the 48 hours or so preceding his death.

Did you have any information about that child which enabled you to form a view as to whether his death was expected or not?

- Α. No.
- Did you gain any impression from other nurses on the floor or from doctors as to whether they regarded his death as expected or unexpected at the time?

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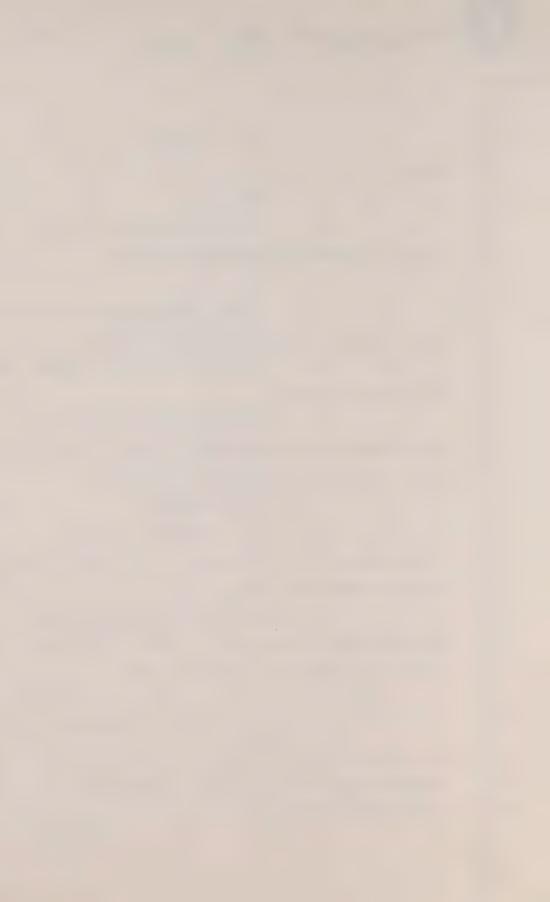
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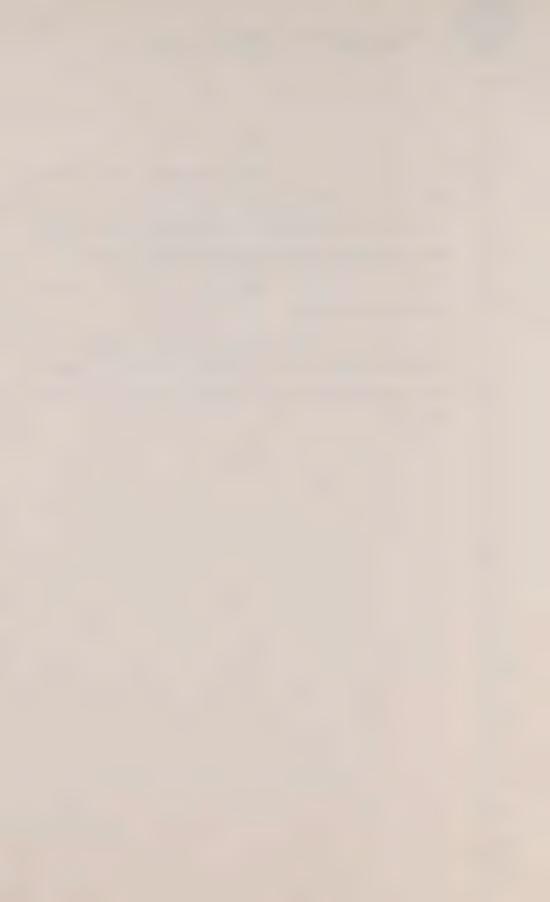
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A. No.

O. Okay. Now, the next child to die on the ward is again one who is not on the chart, he was not categorized in Categories A or B by the Atlanta people, that was Dion Shrum. He died August 9, 7:45 p.m., just after the shift change. He died on Ward 4A.

Now, you had been on long day duty I think on August 9th. I would like you to take the WIN sheets and I think you will be able to confirm that for me.



August 9th?

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Α. Yes.

0. It shows you worked long days on

Α. Yes.

0. It also shows you were relieving on Ward 8E , does it not?

> Α. Yes.

So you were not on the cardiology 0. floor that day?

> Α. No.

On the night of August 18th to 19th, you worked the long night shift on Ward 4A, I believe, is that so?

> Α. Yes.

And that was the night that Kelly Monteith, Kelly Ann Monteith died, a little girl. She was not your patient that night, she was assigned to Nurse Nelles for care. Do you have any recollection of the events of that night leading to that child's arrest and death?

> No. A.

Were you present at the resuscita-0.

tion effort?

Yes. Α.

0. Do you recall what you were doing?



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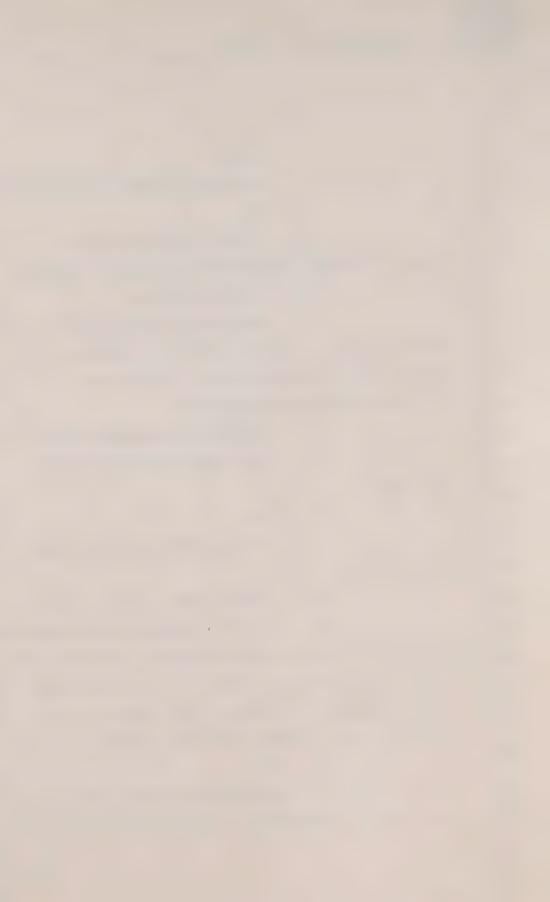
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- O. Do you recall who else was there?
- A. No.

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- Q. And had you had any prior contact with that child prior to the might she died?
 - A. I don't think so.
- Q. Did you gain any impression from the reactions of others on the floor, doctors or nurses, as to whether Kelly Ann Monteith's death was expected or unexpected?
 - A. Immediately after the death?
 - O. Let's start immediately after
 - A. No.
- Q. Did you subsequently gain such an împression?
 - A. I don't know, I don't recall.
- O. You also worked the long night of August 23rd to August 24th on Ward 4A, and that night two patients died on the ward I believe, only one of them appears on the chart. The first was Paul Murphy, he was the older child you remember.
 - A. Yes.
- Q. And he died in Room 423 in the early part of the shift.



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A. Yes.

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O. And then later that night Antonio Velasquez died, do you remember the Velasquez child?

A. Yes.

Q. And he died in Room 418 at 4:25 in the morning. Neither of those children was your patient that night?

A. No.

Q. Now, according to the records that I have reviewed Mary Cooney who was working with your team that shift had the misfortune to have been assigned to both of them; do you have any recollection of Miss Cooney working that night with you?

A. Yes.

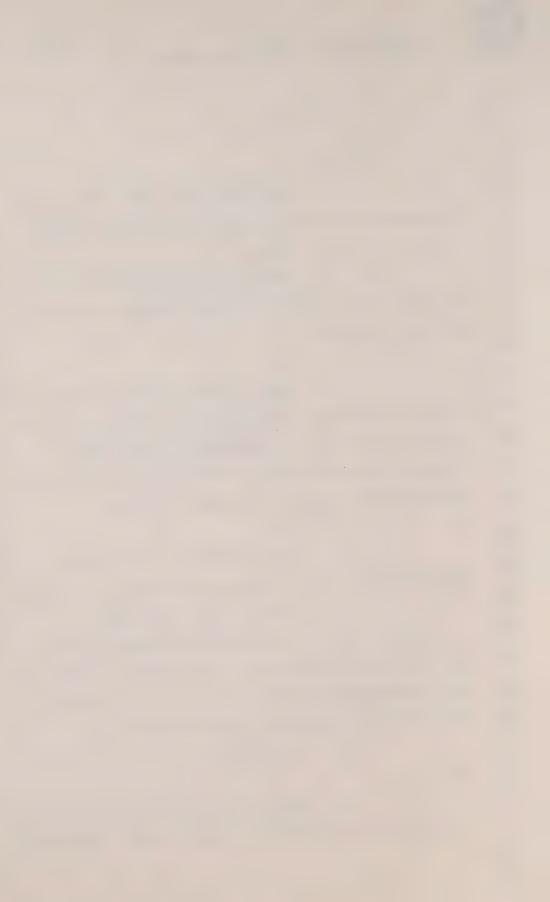
Q. With regard to the Velasquez child, had you had any prior contact with that patient?

A. Yes, I looked after him.

Q. Had you had sufficient contact with him sufficiently close to his death to enable you to form an impression at the time as to whether his death was an expected or an unexpected one?

A. I think more on the unexpected

O. More on the unexpected. What was it that led you to regard the death as more unexpected



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TORONTO, ONTARIO

Well, there was not much that -he was irritable and we thought because of the pain and we just gave him codeine and he became drowsy so we thought he had too much codeine.

Q. Had you observed anything in that child's condition or course that led you to think that he was in danger of suffering a cardiac arrest and dying?

Well, I didn't anticipate his death that mithe.

0. We have heard of the circumstances of the child's death, were you present when he actually had the arrest?

Yes.

Were you present when the resident administered naloxone to the child?

> Yes. A .

Can you give us your best recollection of what occurred, please?

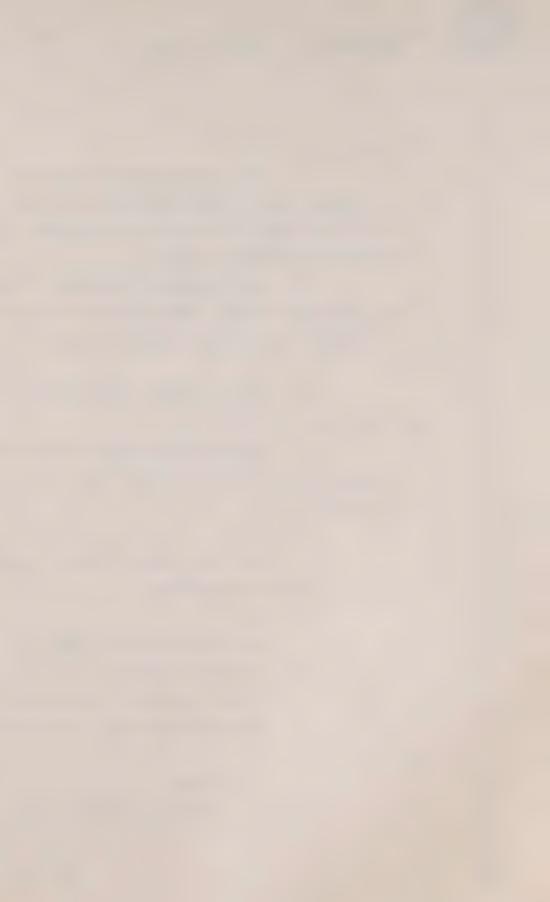
I was feeding one of my babies --

Would it assist you to have the

chart in front of you?

A. Yes, please.

MR. LAMEK: Could we do that, please,



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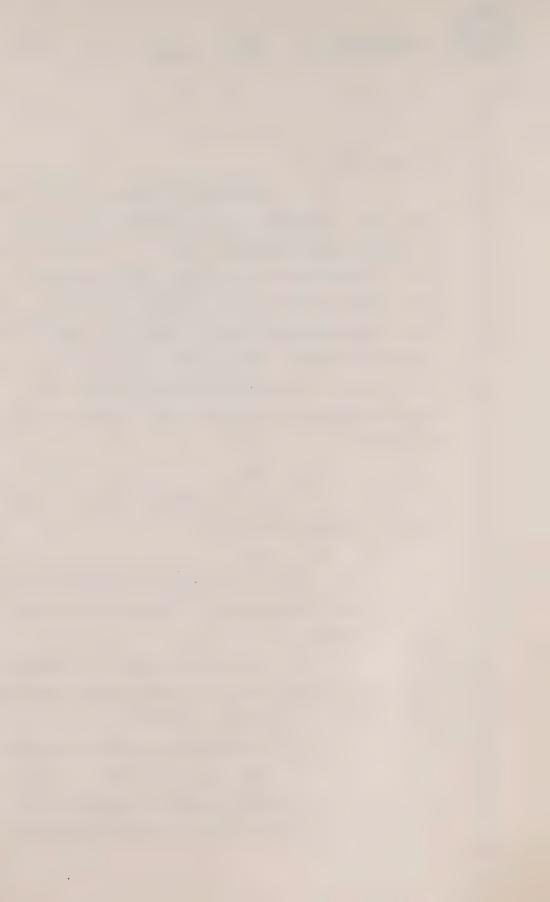
Mr. Registrar

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TORONTO ONTARIO

0. Perhaps we should say first, Mrs. Scott, that according to the assignment book; that, Mr. Commissioner, is Exhibit 32-C; at tab 89 and page 115, it is probably not necessary for you to look at this. Let me show it to you, however, so that you might recall, the assignment book for Saturday, August 23rd shows that you were looking after three children in Room 418, Volk and someone else and Lombardo, and Miss Cooney had two children in 418, one of whom was Velasquez.

- Α. Yes.
- So you had patients in the same room as Velasquez that night?
 - Α. VAS.
- Can you tell us please what you recall of the circumstances of that child's cardiac arrest and death?
- I was feeding one of the babies and Miss Cooney was trying to arouse the baby but she couldn't and she was getting worried.
 - She was trying arouse Velasquez?
- Yes, and she couldn't. I told her to go and get Phyllis because it was easier for her to call Phyllis than for me to put the baby down



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and then go and see what is happening.

Q. Yes.

A. And she shouted for Phyllis and she came in, and that's all I remember.

Q. Do you remember the resident

A. Yes, and he gave narcan plus he thought that he had too much codeine.

O. Yes.

A. I think he had two doses that evening.

O. He had had two doses of codeine that evening?

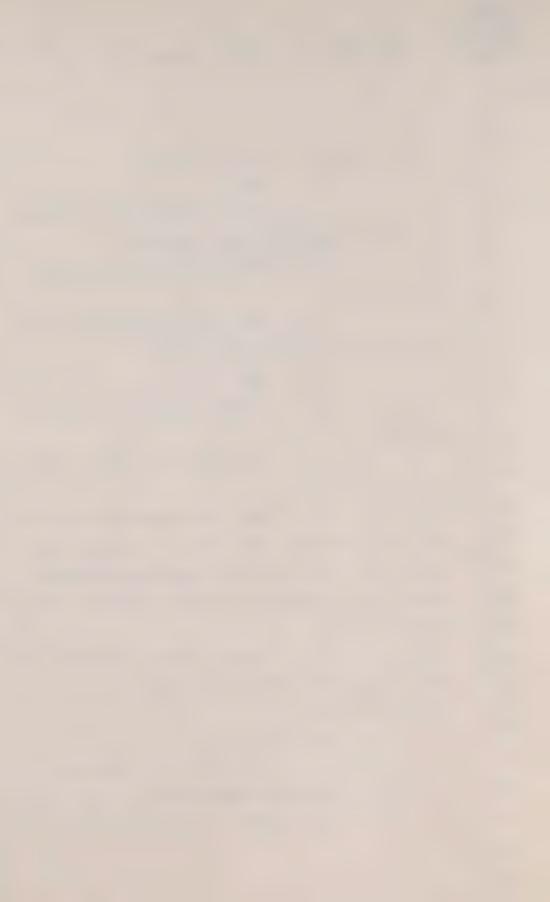
A. Yes. Not necessarily the same shift but, you know, just before we came and then another one, and he gave the narcan and the baby seemed to be improved a little bit and then I couldn't recall any more.

O. You don't recall any more. You don't recall what happened immediately prior to the child's arresting?

A. No.

Q. Were you present during the resuscitation effort on that child?

A. Yes.



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Q. What were you doing?

A. I think I helped Phyllis, I was standing on one side and Phyllis was standing on the other side, I can't remember.

Q. You can't remember what you were doing, exactly what you were doing?

A. No.

Q. Was there any discussion among the people on the floor after that child had died as to why he had died? When I say the people on the floor, I refer to doctors and nurses.

A. Immediately after the death, or a few days later?

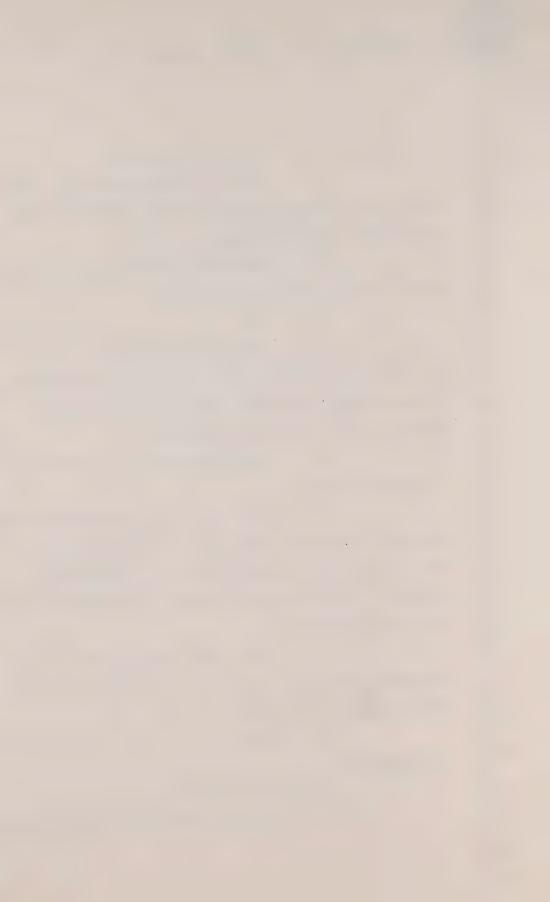
O. Let's start with immediately after the death, after all that was the child who died, and you at least were not anticipating his death that evening. Did other people appear to be surprised that the child had died?

A. Well, they thought that he had too much narcan, the reaction to the narcan, that is what the immediate impression was.

O. On the night that he died that was the impression.

A. After he died, yes.

O. Do you remember who first suggested



that as a possible cause of the child's death?

- A. No.
- O. Do you remember whether it was a physician or a nurse?
 - A. Most probably it was a physician.
- Q. Were you aware of subsequent discussion about the child's death, or were you involved in subsequent discussion about the child's death?
 - A. No.
- O. To the best of your knowledge and information was any other explanation ever advanced for Baby Velasquez's death, other than reaction to the Narcan?
 - A. No.
- O. That takes us then to the end of August, Mrs. Scott. Now from June 30th to the end of August we have had I think ll deaths on the ward, 8 of them are on the charts that are in front of you and we also had Babies Perreault and Shrum and the child Murphy. You had been on duty on the particular ward on which the child died for six of those deaths, that is to say, Dawson, Hoos, Turner, Monteith and Velasquez and Murphy. By the end of August were you concerned about the number of deaths that had occurred on the ward in the two month period?



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- O. Not really you say?
- A. No.
- Q. Was that because of your lack of background in cardiology wards and the death rate you can expect?
 - A. Something like that.
- Q. Did it appear to you that other nurses on the floor, and doctors, were concerned about the number of deaths?
 - A. They were talking about it.
- O. Were they talking about it in such a way as to lead you to think this was an unusual number of deaths that had occurred in two months?

A. No.

THE COMMISSIONER: I'm sorry, was it

yes?

THE WITNESS: No.

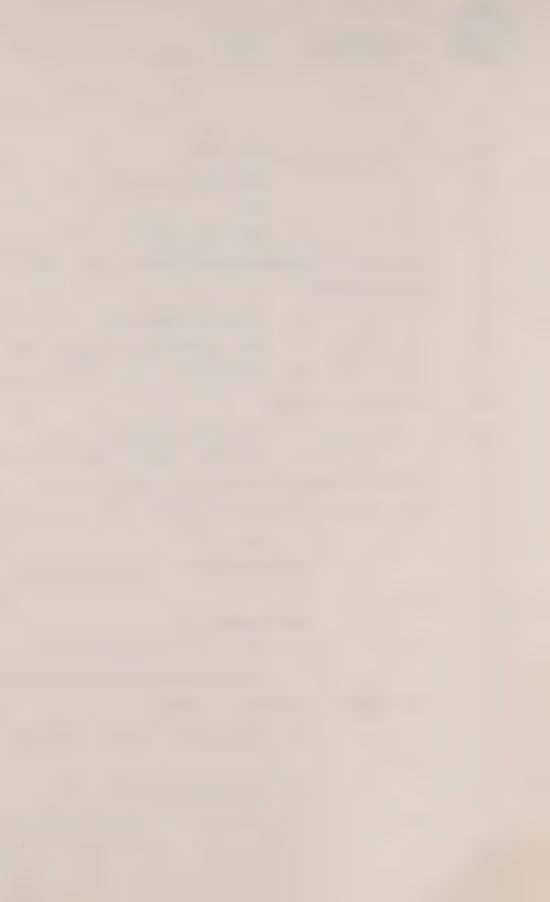
MR. LAMEK: No, the answer was no.

- Q. Why did you understand they were talking about the number of deaths?
 - A. They were all talking about the

deaths.

O. What were you saying about

them?



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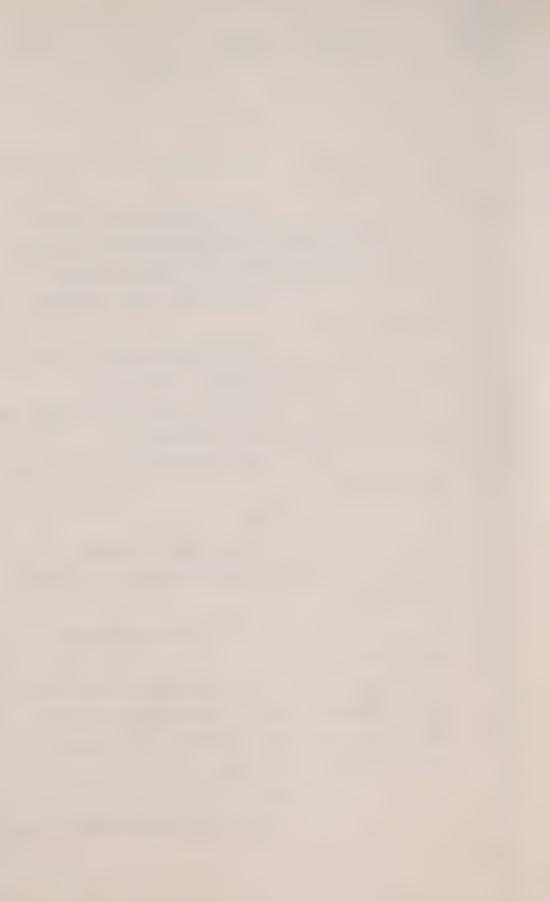
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0	many	deaths.							

- Q. If the question was "Why are there so many deaths", did that not suggest to you that it was an unusually large number of deaths?
- A. Not unusual, but we discussed about the deaths.
- Q. And what explanations, if any, were being advanced for the so many deaths?
- A. As I said before, the doctors were saying that they were very sick babies.
- O. Were they saying that as at the end of August?
 - A. Yes.
- Q. Did that seem to satisfy the inquiries or any concern that the nurses on the floor may have had?
- A. Well, we had to accept the explanation.
- Q. I understand that you had to accept it, but that wasn't quite my question, Mrs. Scott. Did it seem to satisfy the questions and concerns that the nurses had?
 - A. Yes.
 - O. By the end of August had it occurred



Scott dr. ex. (Lamek)

to you that almost all of the deaths had occurred when your team had been on duty?

A. Yes.

O. Was that a matter of some discussion or comment among the nurses on the floor?

A. Yes.

O. What was being said about that?

A. They just noticed they were dying almost the same time and always on our team.

O. Did anyone have any explanation to offer, or explanation to advance, as to why your team should be so unfortunate as to have so many children die?

A. No.

O. You said a moment ago people were remarking that it was about the same time. Do I take it from that that you were aware by the end of August that of the 11 deaths that had occurred since

June 30th, I think seven of them had occurred in the middle of the night, was that a matter that you had observed?

A. I think when Phyllis came back from her honeymoon that was, everybody was aware because they made remarks about, you know, your team, you are getting a lot of bad luck when Phyllis is on,



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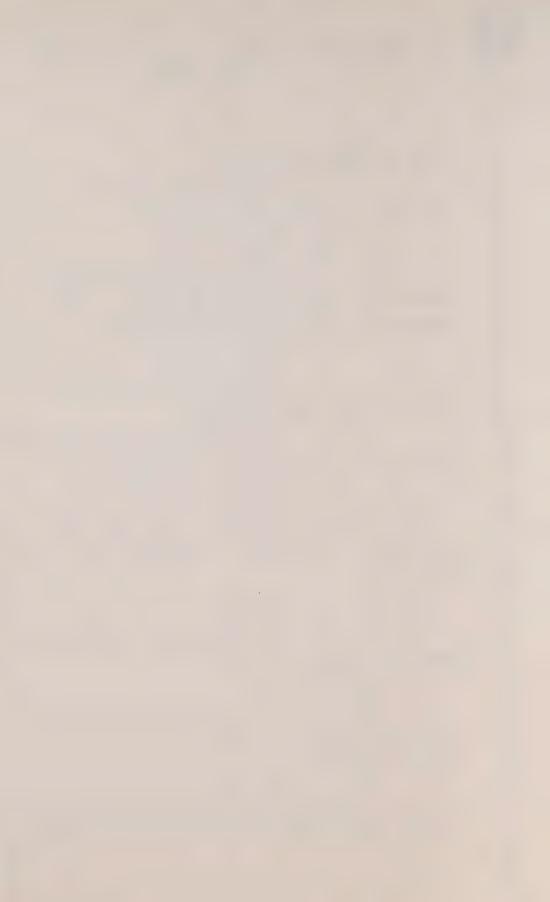
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so we were all aware of that.

- O. Said you were getting a lot of bad luck when Phyllis was on?
 - A. Yes.
- O. But she left for her honeymoon, did she not, right at the end of August, I think
 August 28th and she was married August 29th.
 - A. Yes.
- Q. And didn't come back until the third or fourth week in September?
- A. Yes. They made that remark when she came back and there were a few deaths.
- O. But as at the end of August, had you observed that many of these deaths were occurring in the middle of the night, in the small hours of the morning?
 - A. We sort of --
- Q. Was that a matter of discussion among the nurses on the floor?
 - A. Yes.
- O. Was there speculation or concern as to why the children were dying at that hour of the night?
- A. We did discuss it but since we couldn't find any solution we just left it at that.



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<) ,	No	one	could	find	an	explanation
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0. Let's move into September and into the autumn then. We know that in September a couple of mortality and morbidity conferences were held, and Dr. Rowe had told us about those and others. There was one early in the month of September on September 5th, and then one later in the month if you will remember. Did you attend either of those conferences with Dr. Rowe and other cardiologists?

> Α. No.

Α.

No.

Did you know that they were being 0.

held?

I knew about it after they were A.

held.

0. You didn't know about them in

advance?

No. Α.

O. Did you learn what had been said

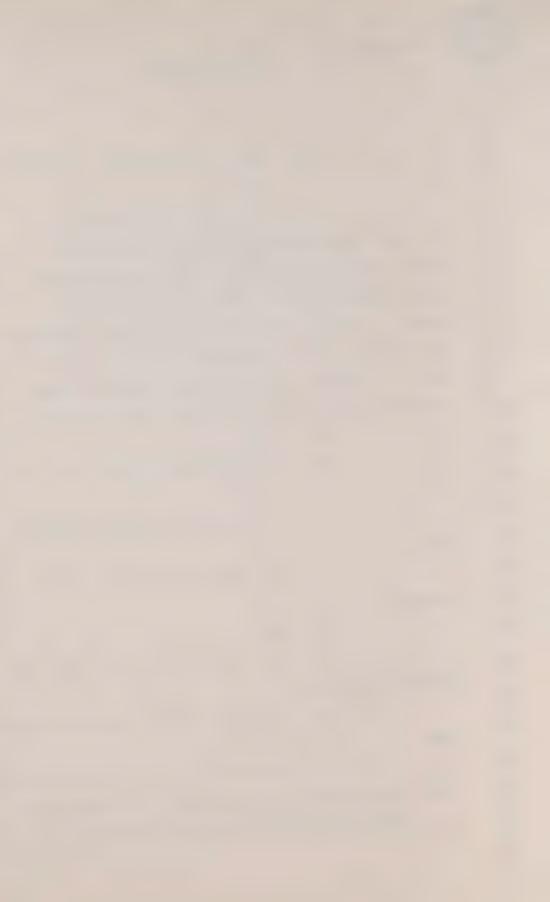
at those conferences?

I think I read in the Communications

book.

O. You refer to the ward Communications book. I am advised, Mr. Commissioner, that is Exhibit

300. Can we turn first to page 5 of the ward 4A



4 5

Communications book which is the first section.

Now that is not one of the morbidity or mortality conferences, but it records a short ward meeting on July 31st, 1980. Do you recall if you were present at that meeting?

- A. No, I don't.
- Q. Did you from time to time look in the Communications book to find out what was new and of interest going on in the wards?
 - A. Yes.
- O. Do you recall seeing the note that is set out on page 5 of that July 31st, 1980 meeting?

 Do you recall ever having seen that before?
 - A. Yes.
- Q. And you will note that the second topic of that meeting apparently was:

"Recent Deaths. News of the cause for Amber is still unknown. Post mortem was done yesterday. Will get more information later but it seems there is an element of surprise re. her cause of death."

That I take it refers to Amber Dawson and apparently records a discussion at a meeting on July 31st.





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Do you recall when you first saw that

- Α. I don't.
- 0. Would it be shortly after

July 31st?

note?

- Α. Yes. I don't know.
- Okay. But it does appear from the note that there was in the minds of some people at least an element of surprise about Amber Dawson's death, does it not?

Having read the note did you discuss with anybody why there was thought to be an element of surprise about that child's death?

- No, I did not.
- It goes on to refer to Andrew Bilodeau. It says:

"An unknown type of truncus.

Probably would not have recovered and survived catheterization much less surgery. Lillian Hoos, the Waterston shunt was widely patent. Post mortem showed chylothorax.

Query cause of death. It has not

been settled yet."

Do you recall whether after reading

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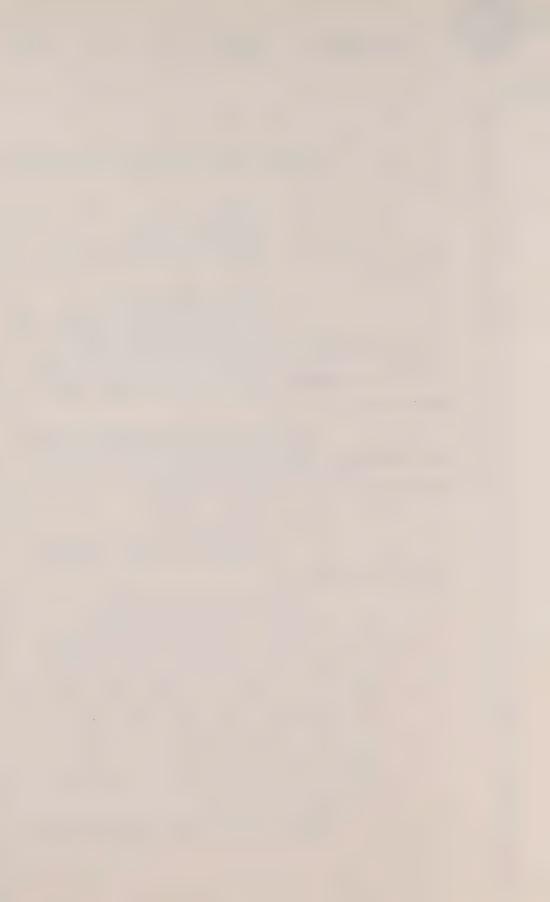
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that note you asked anybody about the resolution of any quarter about the cause of Lillian Hoos' death?

> A. No.

0. All right.

Then there is a note at the bottom with the number 5.8 which may indicate I suppose August Star

> "Dr. Rowe commented that our recent deaths were all because of anatomy that could not be fixed." Do you recall reading that at some

point?

Α. Yes.

And that is consistent with what you told me was the explanation given by the doctors as to why these children were dying, is it?

> Α. Yes.

Now having promised that we 0. would deal with a meeting on the mortality and morbidity conferences we went to another one.

Could you turn with me now to the third section of the book which is the ward meeting section - I am sorry, it is the fourth section of the book. 4A Ward Meeting Book, and on page 175 of the volume was a note of another meeting: August 5, 1980,





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Phyllis, Sue Nelles and Sui.

Do you recall being at a meeting with Phyllis and Miss Nelles?

A. Yes.

Q. On August 5th?

A. Yes.

Ω And the second item apparently
of discussion at that meeting as it is recorded is
that you discussed personal team problems re arrests
and causes of death.

Do you have any recollection of that discussion on August 5th, 1980?

A. Not too much.

Q. Can you tell me what you do

A. Well, I think most of the time we discussed about the stress we were going through.

Q. Yes.

A. On our teams.

Q. What was the cause of the stress as you understood it at that time?

A. Because the deaths seemed to be happening when we were working on nights.

Q. Yes.

A. And all the time with our teams



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own teams.

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and not with other teams.

0. Does that suggest then if not by the end of July at least by the end of the first week in August you were aware that there was cause for concern that the deaths were happening in the presence of your team and at night. Is that a fair inference to draw from the note of the discussion on August 5th?

> Α. Yes.

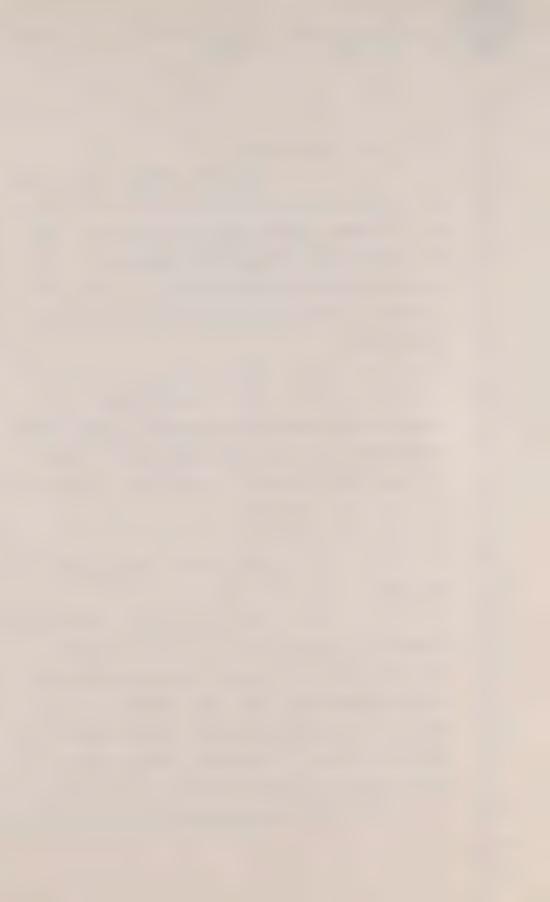
Okay. Was that meeting on August 5th the first time that you can recall anyone expressing concern about the coincidence of deaths with your team and deaths in the middle of the night?

> Α. Yes.

0. Okay.

A. -With our own teams, within our

0. Yes. And from that time through to the end of August would it be fair to suggest that that kind of discussion and conversation went on fairly constantly among you, although not necessarily in formal meetings? As each child died would you not say to each other, "Gosh, there's another one when our team was on; that child died in the middle of the night as well."?



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Α. We might have.

Do you have any recollection of

No

Now we have got to find this great mortality meeting. September 5th, on page 7 of the first section, Mrs. Scott. Mortality rounds, September 5, 1980, you say you were not at that meeting. It appears that Drs. Rowe and Contreras were there.

Did you similarly read the note of this meeting in the communications book at some point?

Yes, probably I did.

And probably shortly after the date of the meeting or when the note appeared?

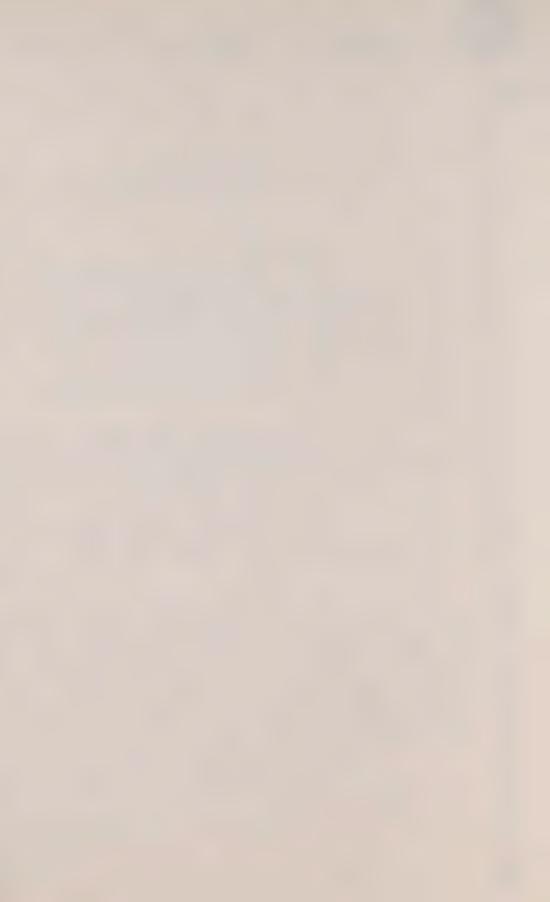
> A. Yes.

Perhaps you would just like to cast a quick glance over that now, Mrs. Scott. It occupies three or four pages I am afraid, and then perhaps you will tell me upon reading that what impression did you form as to the cause of deaths on the wards in the months of July and August?

You have read through the notes,

Mrs. Scott?

Yes. A.





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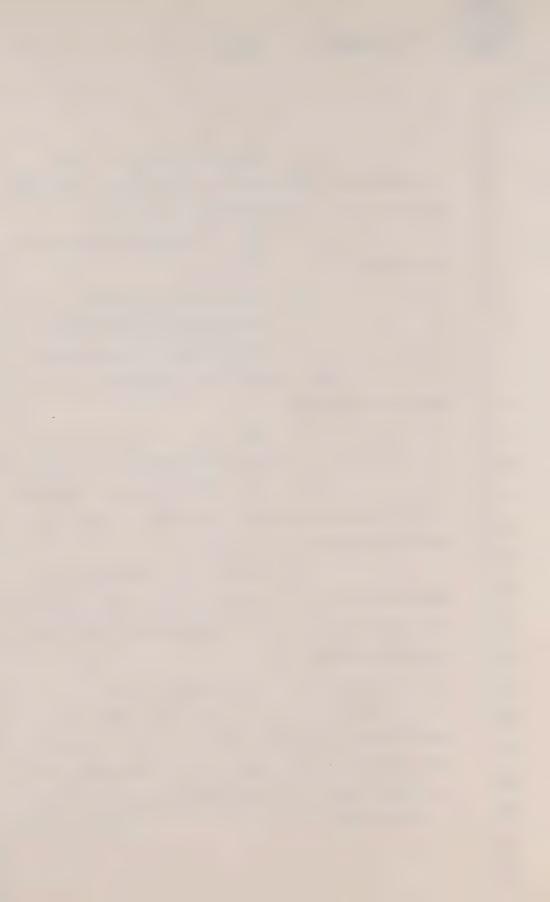
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		Q.	Can	you	ren	nember	now	what	
impressions	or	concl	usion	s you	ıfo	ormed	when	you	first
read that r	note?	Did	you	find	it	reass	suring	g?	

A Yes. We sort of accepted the explanation.

- Q I am sorry, you found?
- A. We accepted the explanation.
- Q. You accepted the explanation that the children's deaths were the result of their physical conditions?
 - A. Yes.
 - Q. And their anatomical deformities?
- A. Yes. That is why we discussed about having a mini ICU in 4A so that we could look after the patients more better.
- Q. I take it you regarded it as something of a relief to know that Dr. Rowe considered that these deaths were not attributable to any failure of nursing skills?
 - A. That's right.
- Q. Of course. Now there was another meeting later in the month, and perhaps I could just ask you to take a look at that while on the thing. Page 16 of the manuscript, same section, Mr. Commissioner.



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Mortality rounds, September 26th.

Could you just take a look at that note for me as well, please, because that one also goes on for two or three same

If you would just glance over it and refresh your memory as to what you understood to have been said. Is it fair, Mrs. Scott, that the note of the second meeting which I take it you read in the normal course of looking at the communications book - is it fair that the message of the second meeting appears to have been once again that these children who died were terribly sick and that was why they died and that you nurses have nothing to be concerned about; nothing to blame yourselves for? Is that the message you got from that note?

> Α. Yes.

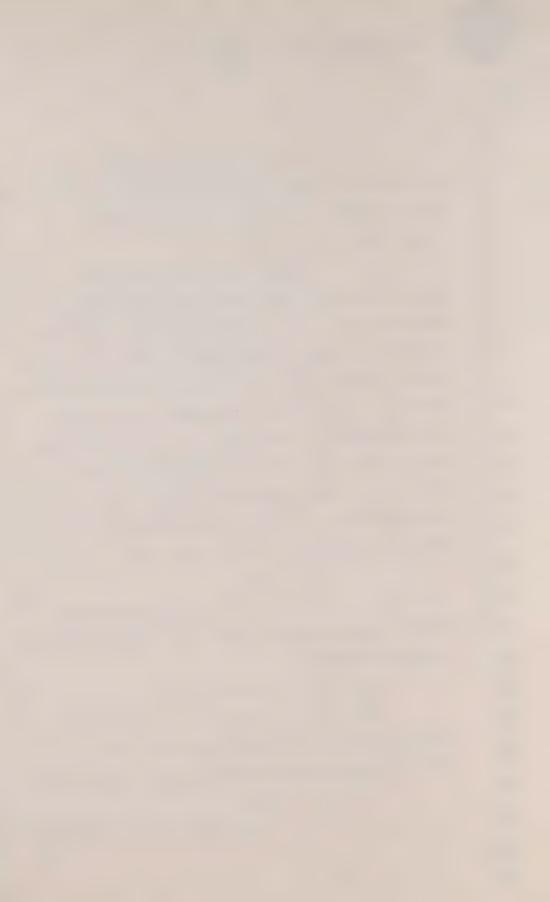
Q. Did that provide you with further reassurance that there was nothing missing in your nursing skills?

Definitely.

Did the other nurses on the floor seem to take similar reassurance from the mortality and morbidity round meetings in September?

> Α. Yes.

Now we know as you have said





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that your team leader, Mrs. Trayner, got married at the end of August.

Did you go to her wedding by the way?

No.

0. Were you invited?

. No.

She was away following the day shift on August 28th until the long night shift of September 24th, and if you needed to you could check back in the WIN sheets.

that period of almost four weeks I tell you, Mrs. Scott, one patient died. That is to say Laurette Heyworth who died at 8:30 in the morning on September 2nd. She is not on the chart. Her death was not regarded by the Atlanta people as in any way suspicious.

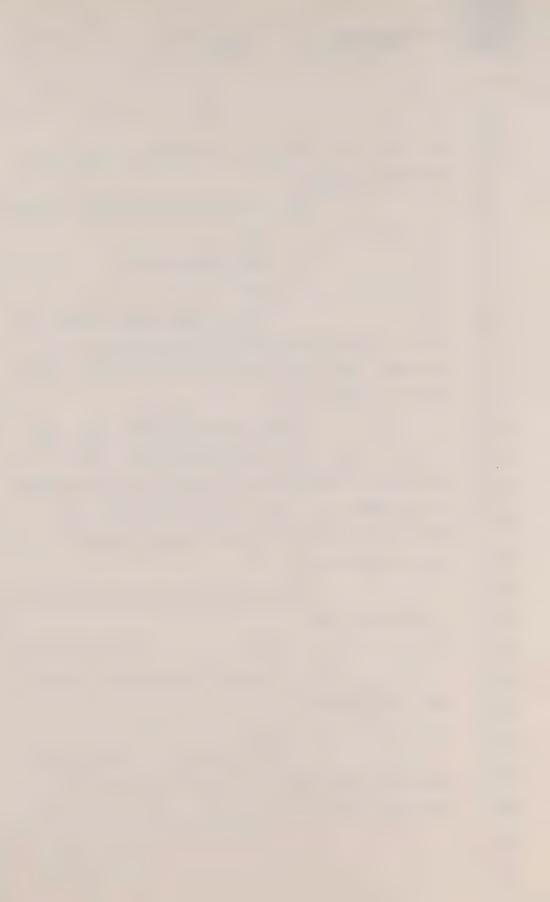
You were working the long day shift on September 2nd?

> Yes. A.

0. She died about an hour after that shift started?

> Yes. A.

Do you recall if she was your patient on that shift? I haven't been able to establish that.



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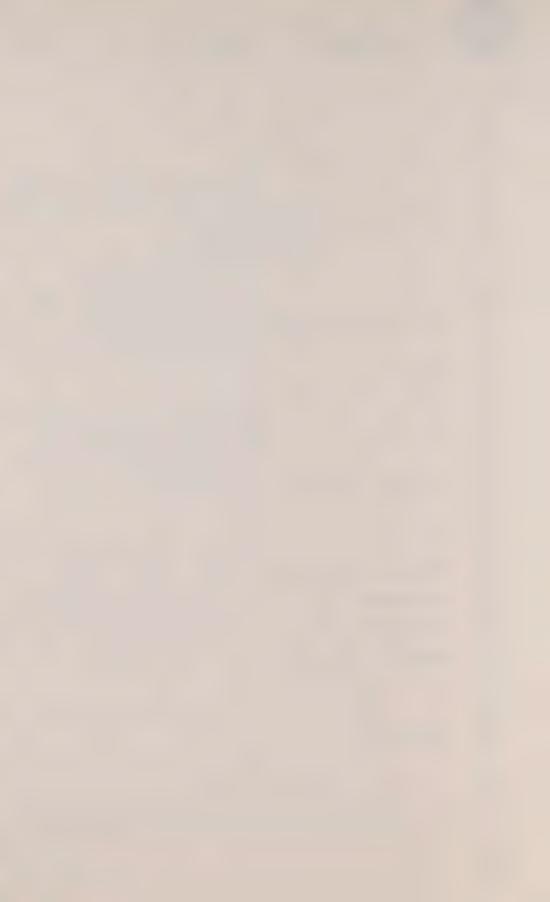
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0. She was not? Do you have any recollection of the events leading to her death? She was an older child you remember?

- Α. Yes, she was in Room 23.
- Yes. Did you have any view as to whether her death was expected or not?
- I think there was a no 25 Code Α. sign.
 - There was a do not resuscitate? 0.
 - No, do not resuscitate, yes.
- Does that suggest to you that her death was not at all unexpected?
 - Yes. Α.
- All right. Now after the death of Laurette Heyworth on September 2nd at 8:30 in the morning there was not another death on Wards 4A or 4B until the night of September 24th-25th and Brian Gage died that night. Do you recall that?
 - Α. Yes.
 - You were on long night duty

that night?

- Yes. Α.
- And indeed for the first time we now have a patient for whom you were assigned to





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care I think. You were in charge of Brian Gage the night he died, weren't you?

- A. Yes.
- 0. He was in Room 418?
- A. Yes.
- Q. And that was Mrs. Trayner's

first shift of duty since her wedding as I remember it?

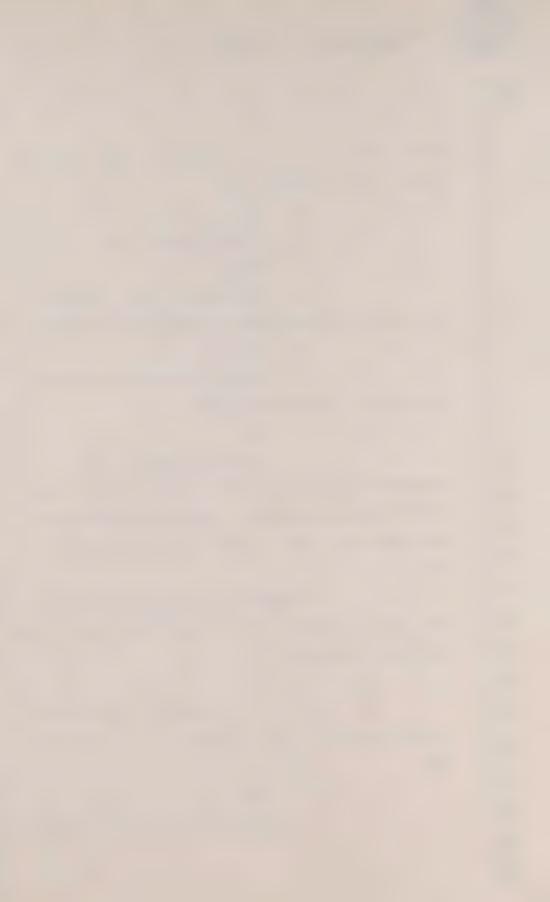
- A. Yes.
- Q. Indeed as the WIN sheets show.

Is that your recollection too?

- A. Yes.
- Q. I want to show you the assignment book if I may, Mrs. Scott, and have you confirm something for me. You are getting loaded up with books over here. I will take them away in a moment.

On Wednesday, September 24th, the long night assignments were: Miss Nelles was in charge as acting team leader.

- A. Yes.
- Q. Mrs. Trayner had four patients in Room 418 and you had one patient in 418 and six in 421?
 - A. Yes.
 - Q. Mrs. Christie was also on duty





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and she had seven patients, four of them in 425, two in Room 42; and one in 423?

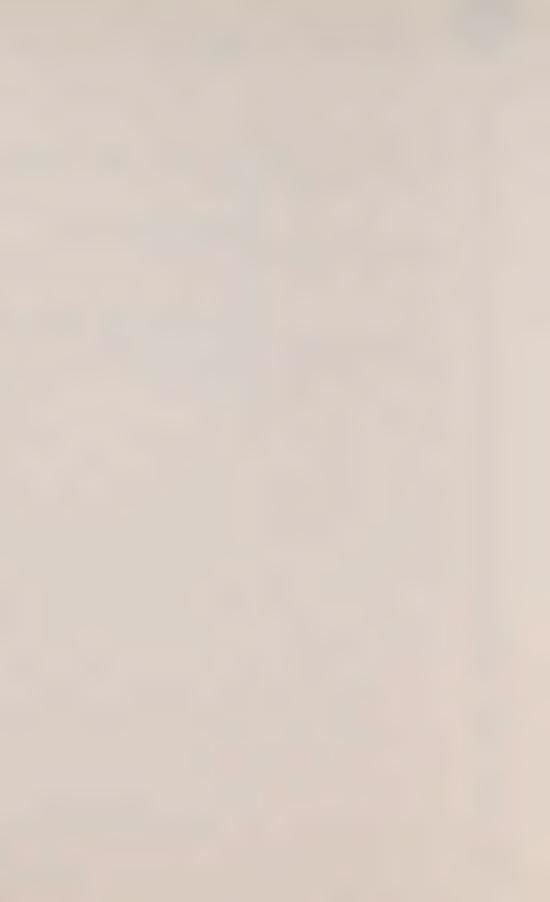
> A. Yes.

Your one patient in 418 was Brian Gage, was he not?

A. Yes.

And it is fair then that between 0. you and Mrs. Trayner all of the five patients in Room 418 were covered, weren't they?

> Α. Yes.



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 $\ensuremath{\mathbb{Q}}.$ She had four of them, you had Brian Gage?

A. Yes.

Q. Now, Brian Gage wasn't on constant care nursing obviously, you had a lot of patients somewhere else that night?

A. No.

Q. He was not on constant care nursing, he wasn't on shared care nursing?

A. No.

Q. Just standard routine nursing care for that child?

A. Yes.

Q. Recognizing that you had six patients in Room 421 and only one patient, Brian Gage, in Room 418, can you recollect for me roughly how you allocated your time between those two rooms that night, where did you spend the majority of your time?

A. Half and half.

Q. Half and half?

A. Yes.

Q. You were in 418 with Gage as much as you were in 421 with six other patients?

A. Yes, because he was vomiting

all the time.

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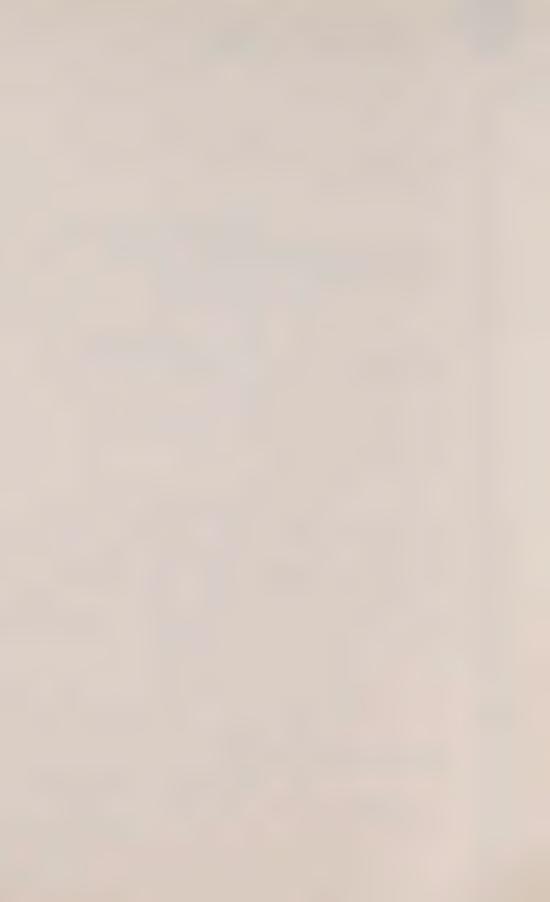
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Yes. Was anyone else looking after children in Room 421 or did you have them all in there? I think you had all the patients in Room 421.

A. Yes.

Q. Who was feeding them for you?

'. I was.

You were feeding them?

Yes.

That I take it takes some time?

Yes.

Q. All right. Mrs. Trayner had no patients other than in Room 418?

A. That's right.

Q. Do you have any recollection as to whether she was in Room 418 with any frequency or for any lengthy periods of time that night?

A. She was there most of the time.

Q. Most of the occasions when you were in the room was she there?

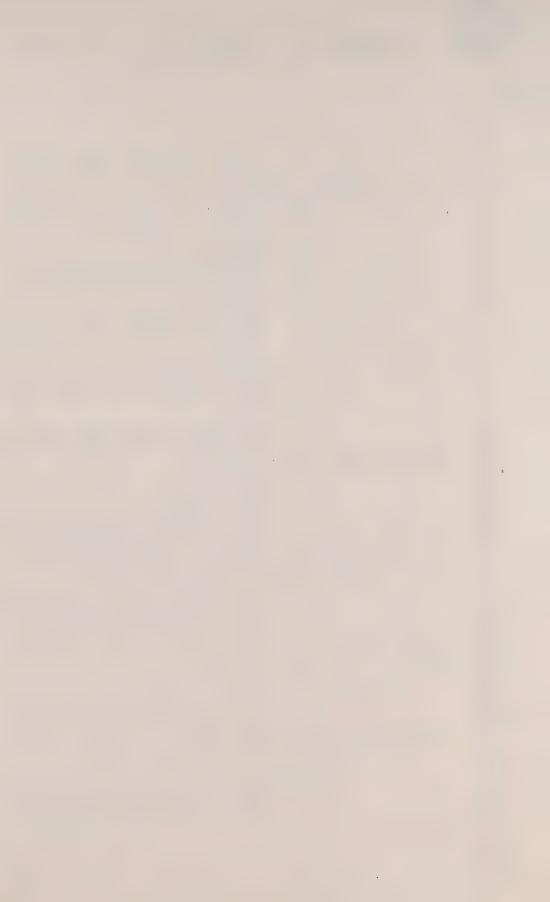
A. Yes.

Q. Do you recall leaving the room at any stage and her being there?

A. No.

Q. What did you do for breaks that ght?

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2	L.	I went the usual time after I
3	fed the babies.	
4		Okay, tell me, what's the usual
5	time? First there is a	a coffee break, isn't there, in
6	the early part of the s	shift?
P7	II.	les.
7	7	What time do you usually take
8	your coffe∈	
9	A. I	About 10, 10:30.
10	. Z	All right.
11	A. 1	It all depended on how many
12	babies I had to feed.	
13	Q. (of course, yes. Do you have
	any recollection as to	when you took your coffee break
14	that night?	
15	A. N	lo.
16	Ω. Ι	oo you have any recollection
17	that it was anything ot	her than the usual time?
18	A. I	t was the usual time.
19	Q. I	t was the usual time?
	A Y	es.
20	Q. S	o, 10, 10:30, in that area?
21	A. Y	es.

Q. And as I understand it later in the shift it was the practice to take a lunch break?





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A. Yes.

And a lunch break lasted, what, about 45 minutes?

A. Yes, or sometimes more if we are not busy but if we are busy we take less.

Yes. On the average about 45

A. Yes.

O. Do you recall what time you took your lunch break that night?

A. No.

Q. What time do you normally take

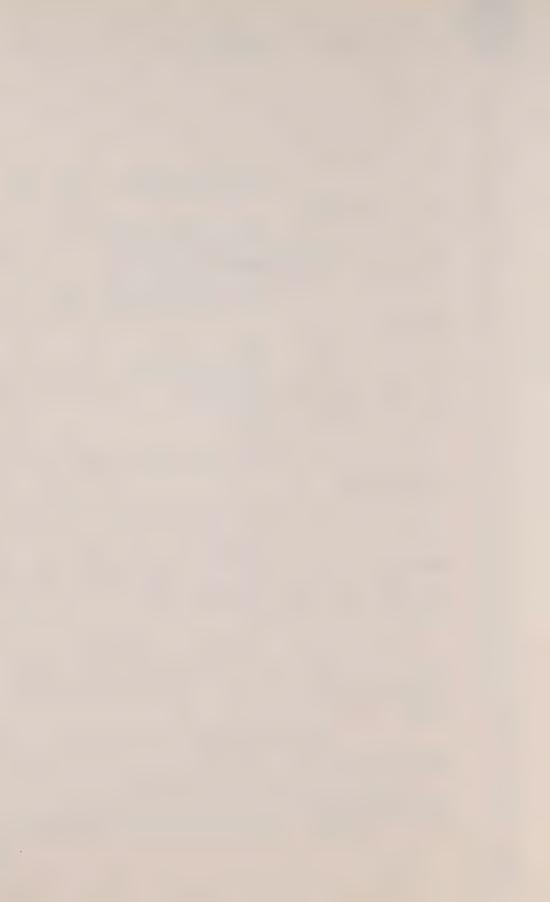
A. About 1:30.

Q. All right. Do you have any recollection that you took your lunch break at anything other than the normal time that night?

A. No.

Q. I wonder, Mr. Registrar, if you could put the Brian Gage chart in front of Mrs. Scott, please.

Now, Mrs. Scott, it may be of assistance to you in recalling the events of the night but your nursing note for that long night shift starting September 24th is on page 65 of the chart.



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First of all, I am right in thinking am I not, Mrs. Scott, that Brian Gage was scheduled for surgery the next day?

> A. Yes.

And the surgery had been school of more rudden, a vacancy had become available in the UK?

I don't remember that but he Α. was scheduled for the next morning.

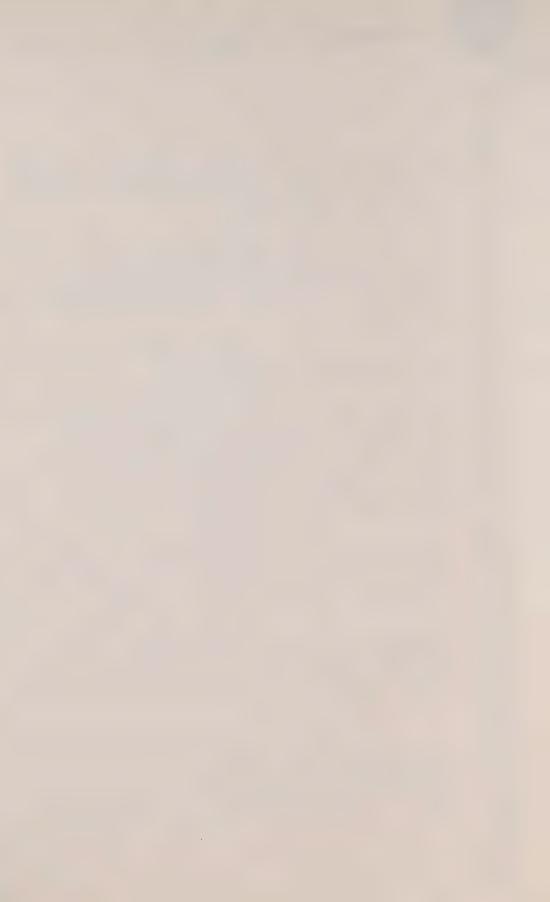
He was scheduled for surgery the next not lang fan you give me please, with the assistance of your nursing note if necessary, your best succlimation of that child's condition and course in the early part of the shift?

Well, according to my notes he was in no respiratory distress and his vital signs were stable. He was pale but not cyanosed.

All right. Now, you say according to your notes -- that is indeed what the notes say. Is that what your recollection is also?

> A. Yes.

That he had stable vital signs, didn't even have any trouble with his respiration, pale but he is not turning blue or anything of that sort?



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7	Q.
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	for you?
11	ζ.
12	Σ· Α.
13	all the time.
14	Q.
15	A.
16	the team leader told
17	to feed him because
18	into him for his OR
19	Q.
20	nutrition into the o
21	A.
22	Q.
23	feed him if you can
24	down?
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Α.	No.
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.. Is it fair to say that in the y part of the shift the child's only difficulty eared to be persistent vomiting?

> A. Vomiting, yes.

And he was vomiting whenever he fed, was he not?

Yes.

Was that a matter of concern

Yes.

0. Why was that a matter of concern?

Well, I didn't like him vomiting

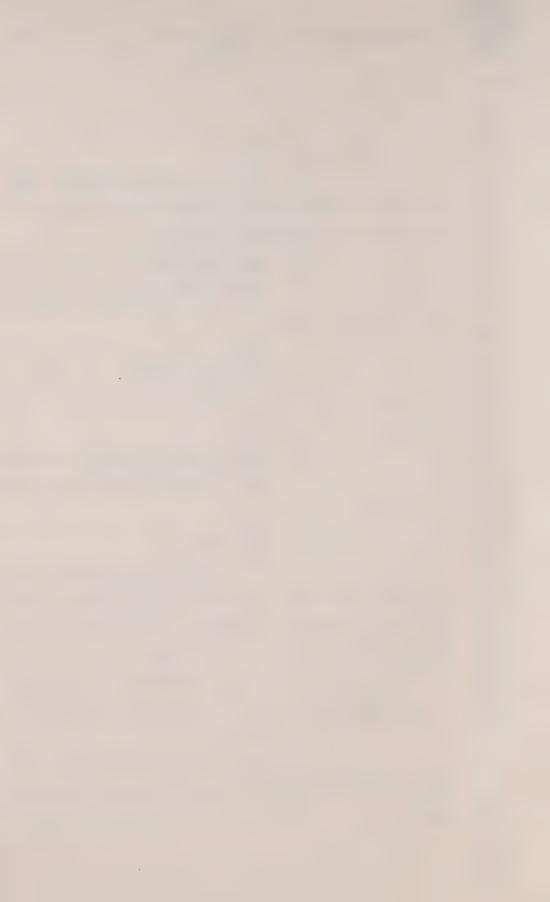
0. Obviously.

So, I told the team leader and team leader told the doctor and he said, no, try eed him because he wanted to push some calories him for his OR the next morning.

O. I see. He wanted to get some tion into the child, he was going to surgery?

> A. Yes.

So, your instructions were to him if you can and if you can to keep the food



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A. Yes.

0. All right. And that I take it was a rather frustrating thing to try to do that night, . he was vomiting every time you fed him?

> A. Yes.

Other than the vomiting however did the child otherwise appear to be stable?

> A. Yes.

By that I don't mean was he well, obviously he wasn't terribly well but he was stable was he not?

> Α. Yes.

Who gave the child his last feeding before his arrest?

> A. Phyllis Trayner.

0. I'm sorry?

Phyllis Trayner.

Do you recall what time that

was?

No, I do not. Α.

How did it come about that

Mrs. Trayner fed him?

Well, he was vomiting all the time and sometimes it works if you get another nurse to feed the baby hoping that he will keep all of his feed down.



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d	23	Brian Gag
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Yes. So, did you ask her to

Yes.

Were you there when she fed him?

I don't recall.

At approximately what time was

When I came back from lunch she wasn't feeding him, so, she must have fed him when I was at lunch; I don't recall.

Okay. Well, did you go for lunch before the child had been fed for that last time?

I don't recall.

Q. When you left for lunch, and let's assume for the moment subject to checking anything we can, that you left about the normal time, about 1:302

A. Yes.

Q. When you left for lunch was anybody in the room with Gage and the other children?

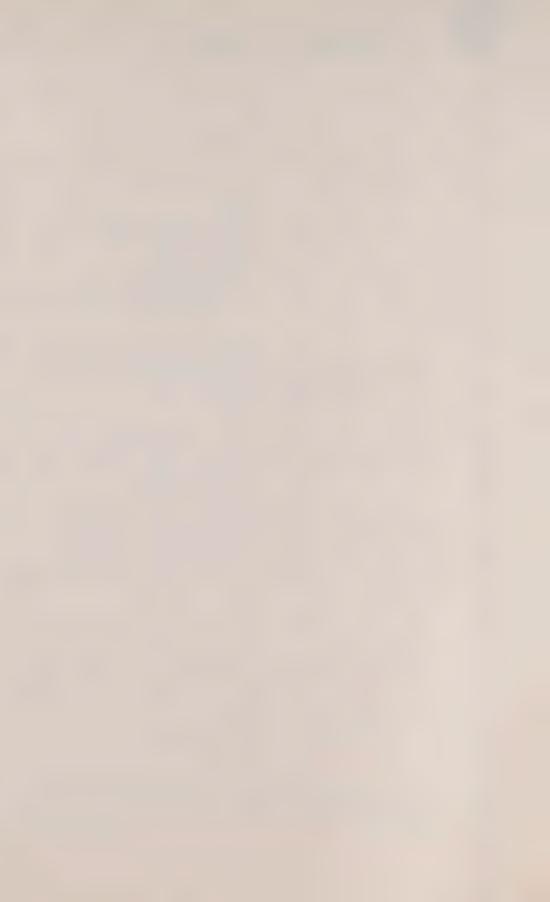
A. Yes.

Q. Who was there?

A. Phyllis.

Q. Was she feeding the child

Brian Gage at that time?



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or 8 o'clock?

Α. I don't recall.

You don't recall. Do you recall whether it was before you went for lunch that you had asked her if she would feed him?

> A. I don't.

Well, do you recall his being fed after you came back from lunch?

> I don't know, I don't recall, A.

0. At page 104 of the chart we've got the medication sheet, Mrs. Scott. That discloses: does it not that you gave to the child, the lower right-hand quarter of the page, at 9 o'clock in the evening aldactone; do you see that?

> Α. Yes.

And then at 10 o'clock, what's that, sodium what?

Oh, it is just for the eyes.

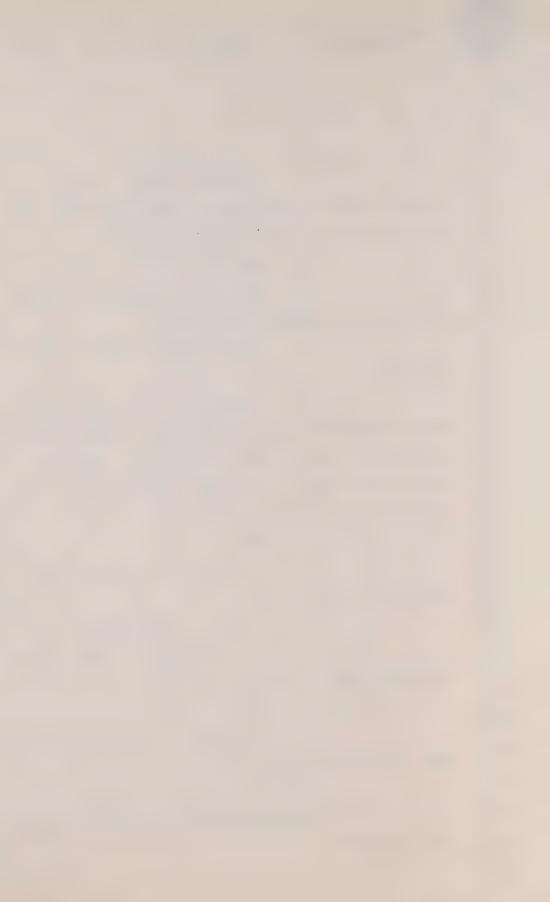
It is just for the eyes. That was an ointment for the eyes, was it?

> A. Yes.

Those were the only medications that you administered to the child that night?

> Yes. A.

THE COMMISSIONER: Is that 10 o'clock





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MR. LAMEK: I think at 2200 hours is probably 10 o'clock, sir.

THE COMMISSIONER: Yes, all right.

MR. LAMEK: Q. Did you administer that medication and that treatment at the hours that you have recorded?

A. Yes.

Q At page 133 of the chart on the flow sheet your signature appears only once on that page against 0300. It otherwise appears, does it not, that vital signs were taken at 8 o'clock, 10 o'clock, midnight and 2 o'clock?

A. Yes.

Q. Did you take those vital signs?

A. Yes.

0. And so recorded them?

A. Yes.

Q. Now, the pulse rate of 49 that is recorded at 0300 hours, was that the pulse rate of the child immediately prior to his arrest when you first saw him getting into trouble?

A. Yes.

Q. Which in fact we know from the chart was a little after 3 o'clock, about 3:20 as I recall it?



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2 Yes.

But you noted it at about three?

Yes.

Okay. Well, give me your best recollection of what happened with that child that night and the events leading up to his arrest, Mrs. Scott?

I went into the room about that Α. time of 3, 3 o'clock.

> 0. Went into the room at about three?

A. Yes.

Yes.

And I looked at him and he looked a bit uncomfortable, I thought he needed

THE COMMISSIONER: Can you go just a little bit more slowly. I think I am having difficulty hearing. I don't know whether anybody else is. None of the amplification comes my way, so, I am dependent upon the human voice and rather elderly ears. Could you just speak up a little bit and a little bit more slowly.

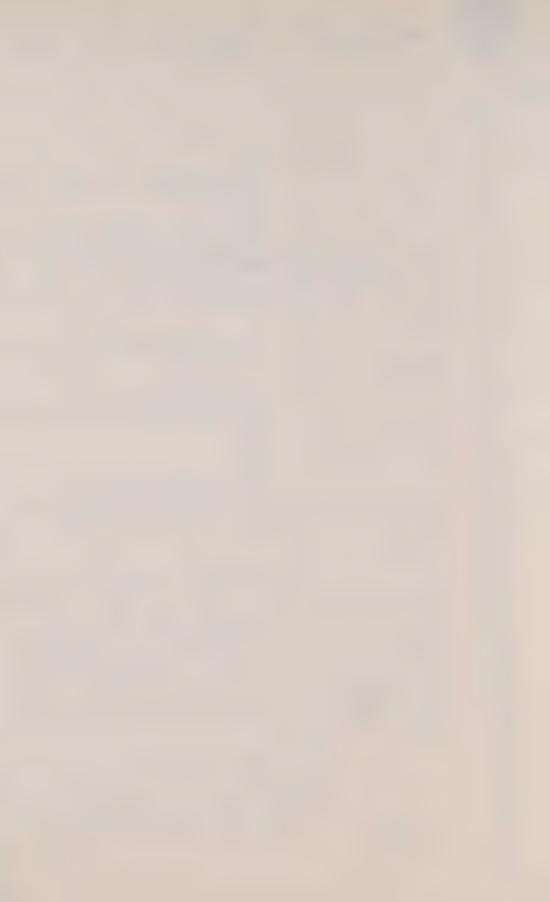
THE WITNESS: I'm sorry.

THE COMMISSIONER: Thank you.

Now, you went into the room at

3 o'clock?

burping.





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was lie!

to burn !

THE WITNESS: About five past three or 3 o'clock, and I looked at the baby and he was a bit and I le and I thought he needed burping. So, I sat him up inside the isolette.

MR. LAMEK: Q. He was in an isolette,

A. Yes.

Q All right. So, you sat him up

A. Yes.

Q All right.

A. And he did burp. He sort of opened his eyes and looked around for the first time that night and then I put him back and make him comfortable and when I was just getting ready to leave the room I noticed his respiration.

Q. I'm sorry, you were just getting ready to leave the room and what?

A. I was just, you know, sort of settling him back and I was going to go out of the room to go and look at my other patients in the other room.

Q. Yes.

A. And I thought the monitor sort of made noises. So, I went back to him and listened



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Q. Okay. You saw the monitor, what was the monitor doing?

- A. It was buzzing.
- Q. The monitor was buzzing?
- A. Yes.
- Q. Does that mean that his heart rate had dropped?
 - A. Coming down, yes.
 - Q. From the rate set on the monitor?
 - A. Yes.
- Q. So, you listened to his heart rate with a stethoscope?
 - A. Yes.
 - Q. And what did you hear?
- A. Well, it was very faint and went right down, so, I shouted for Susan Nelles, she was the team leader.
 - Q. Yes.
- A. And Phyllis was with me and she came in and had a look.

THE COMMISSIONER: I'm sorry, you shouted for Susan Nelles who was the team leader?

THE WITNESS: Yes, she was outside the

room.





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THE COMMISSIONER: Was Mrs. Trayner ...
THE WITNESS: She was in the room

with me.

THE COMMISSIONER: In the room, all

right.

 $$\operatorname{MR}.$$ LAMEK: Q. And did Miss Nelles come into the room?

A. Yes, she came in and then we told her you had better get a doctor.

Q. All right. Did Mrs. Trayner come over to the child's bed?

A. I don't know, she was with me, she was beside me, standing beside me.

Q. Yes. And then what happened?

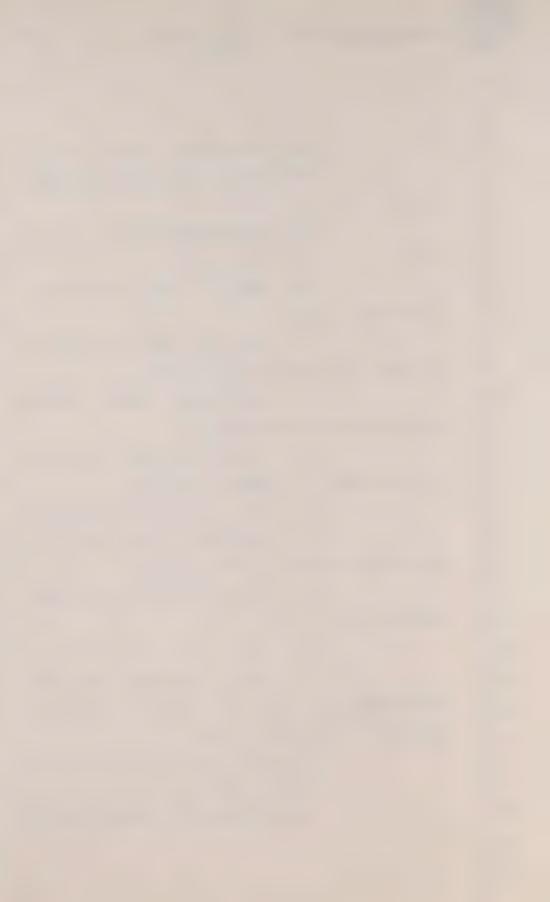
A. And then I think we called the arrest team and then I can't remember.

Q. And the resuscitation effort followed I take it?

A. Yes.

Now, on page 65 of your note in the chart, Mrs. Scott, in your note, the second paragraph of that note you say:

"Babe was put on his left side all evening and night. When I sat him up to burp him gently he was alert and





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five minutes after putting the baby down, 0320 hours, his apex fell to 49 and weak. CPR was initiated and a Code 25 was called." Now, what I want to do if I can with

"in no respiratory distress. About

you, Mrs. Scott, is try to fix the relationship of events, the chronology of events. You noticed that this child's apex was falling at about 3:20 on the morning?

> Α. Yes.

And you said in your note that was about five minutes after you had burped the child and put him down again?

A. Yes.

Which would set that event at about 3:15 I take it?

> Yes. Ά.

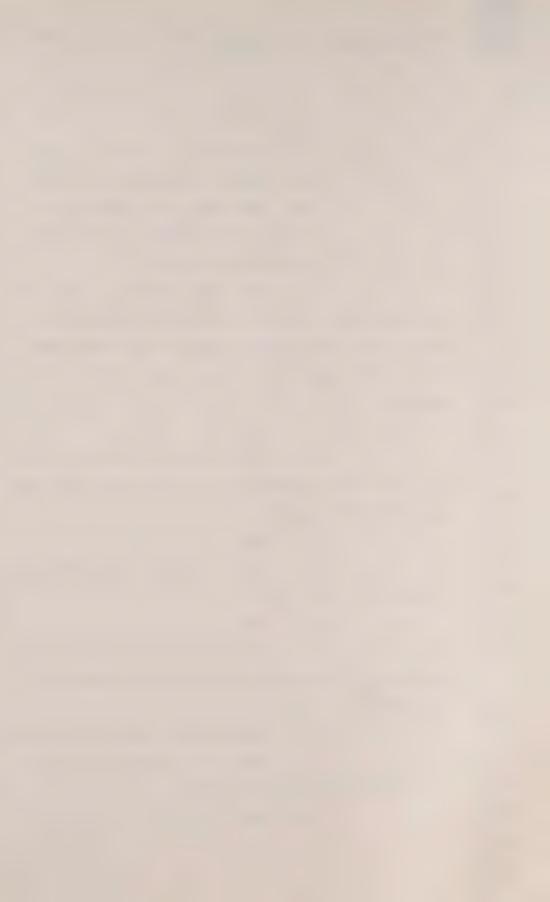
All right. And how long had you 0. been in the room with him before you sat him up to burp him?

Not too long, about five minutes.

Okay. So, perhaps you went

into the room then at about 3:10?

Yes. A.





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Brian Gage?

Gage's room?

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0. All right. I take it that by 3 o'clock in the morning you had already had your lunch?

> Α. Yes.

Do you recall how long you had been back from lunch when this event occurred?

Α. I don't. I spent some time in the other room with the other six babies.

> 0. Before coming into 418 to see

Yes, I went and had a look and A. then went to the other room and did some nursing care there.

Okay, you came back from lunch, you looked in on Brian Gage?

> Α. Yes.

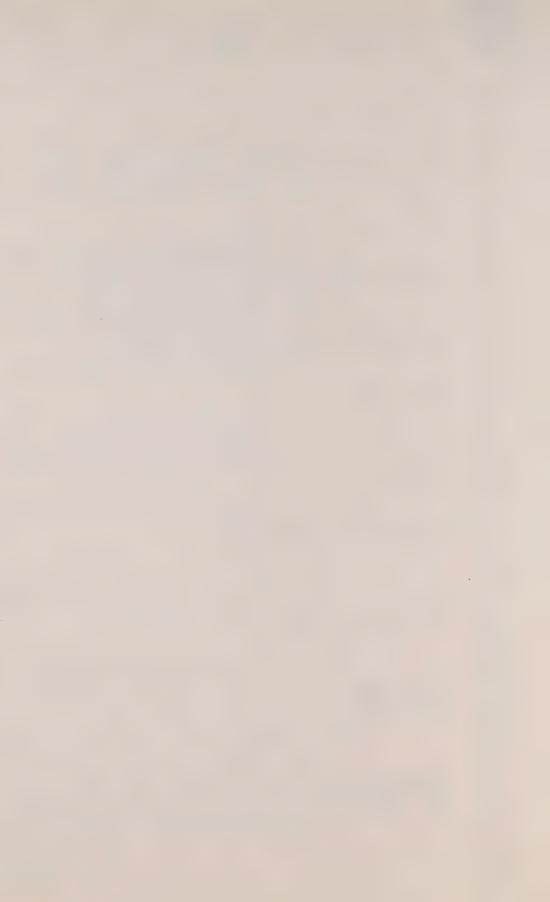
And then went to the other room to look at your six patients there?

Yes.

And then came back into Brian

Yes.

Is it of any assistance in helping you place the time you got back from lunch, Mrs. Scott, that you recorded taking vital signs at





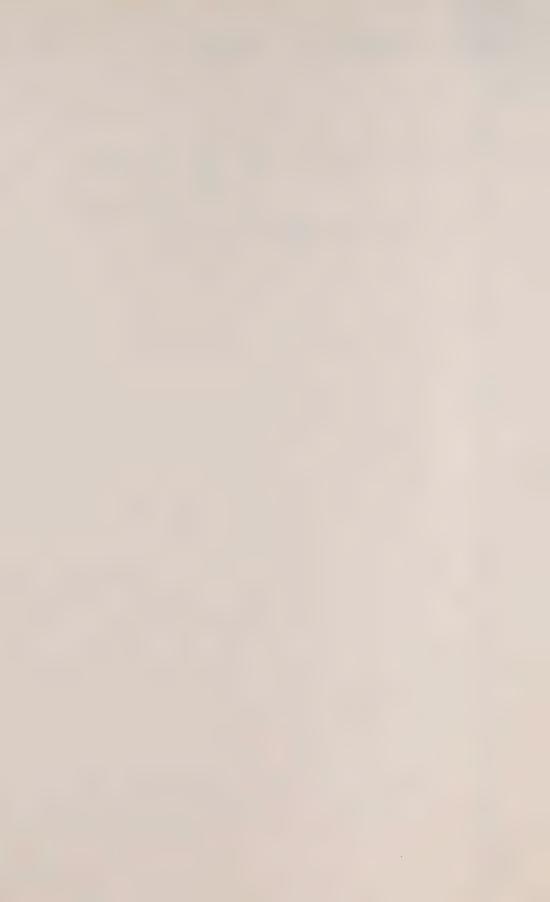
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2 o'clock in the morning; that's on page 133.

A. 2 o'clock.

Yes. You show that you

recorded vital signs at 2 o'clock.



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A. Well I could take the signs 10 minutes past..

Q. Either 10 minutes to or 10 minutes past, sometime in that area?

A. Yes.

Q. Do you recall whether when you came back from lunch and you went in to see Brian Gage, did you take his vital signs at that time do you remember?

A. When?

had my lunch after that.

Q. When you got back from lunch?

A. I don't recall. Either I came back, I had my lunch at 1:15 or something and then I came back and did my signs at two, or I

O. After 2 o'clock?

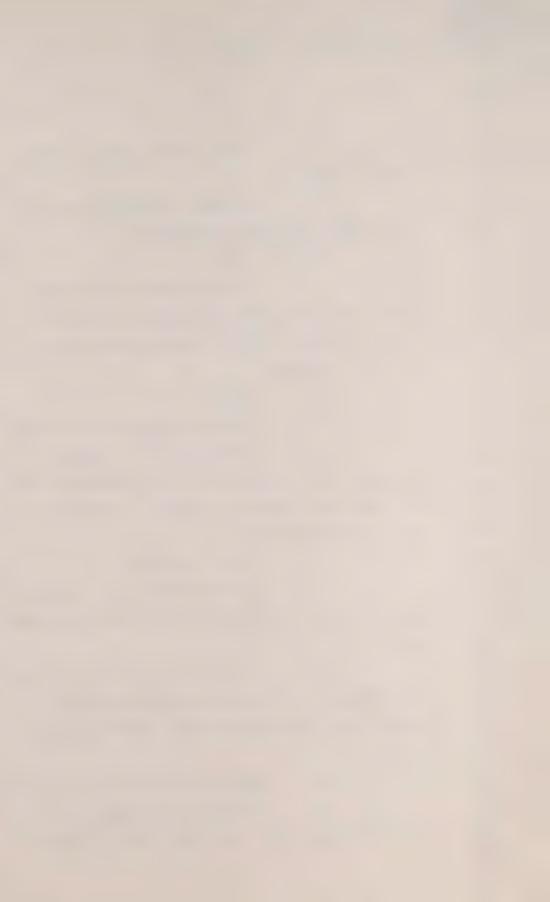
A. Yes, sometimes I do. Because remember I had all those babies to feed in the other room.

Q. Yes I do. But if you had your lunch by 3 and you fed all those babies as well between 2 and 3 there wasn't much time for lunch, was there?

A. Most probably I had it earlier.

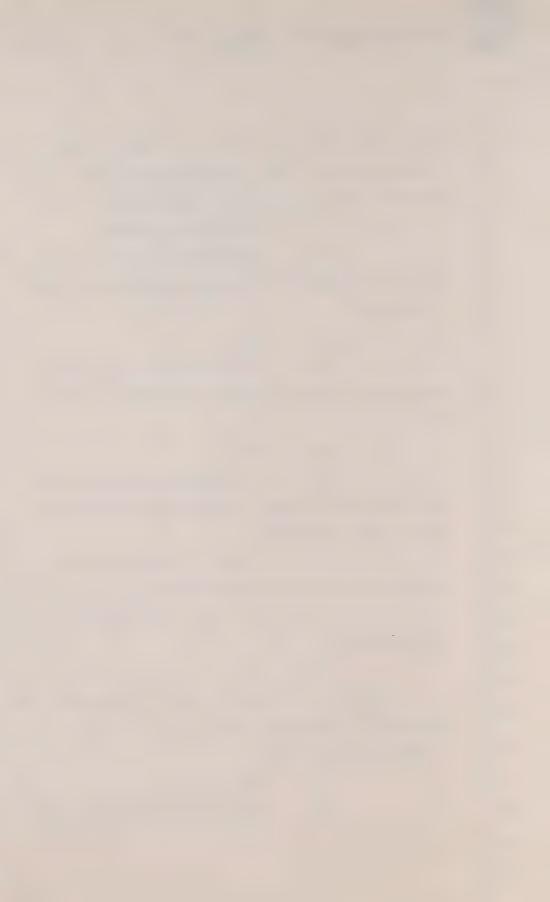
Q. I would have thought so.

Is it not likely, Mrs. Scott, that the 2 o'clock



vital signs which	may have been ar	nywhere from 10 to
2 until 10 past 2	were taken when	you looked in on
the child when you	a came back from	lunch?

- A. Yes, most probably.
- You looked in on him, took
 his vital signs, and he seemed perfectly all right
 I tak
 - A. Yes.
- Q. You went out to look after your other children and got to him about 10 past
 - A. Yes.
- Q. I suggested to you that that is likely, do you have a recollection of it that that is what happened?
- A. I have a recollection of going in and looking at him and burping him.
- Q. But that was sometime after 3 as we know?
 - A. Yes.
- Q. And you said a moment ago that you may have taken your lunch at 1:15 or 1:30 or something of that sort?
 - A. Yes.
 - Q. Is it your recollection that



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that is what you did, that some time around the usual time you went off for lunch?

> Α. Yes.

Q. And when you went for lunch who was with the child?

I don't recall.

When you came back from lunch who was with the child?

A. I am not quite sure but Phyllis was there, she was the only one there.

Q. That night, until the time that child went into arrest, do you recall seeing anybody else with him other than yourself, or perhaps Mrs. Trayner, or in Room 418 at all?

A. Well, Susan came in a couple of times to look at him because he was vomiting.

Q. Were you there on those

occasions?

A. Yes.

Q. And did anyone else to your recollection go into the room that night?

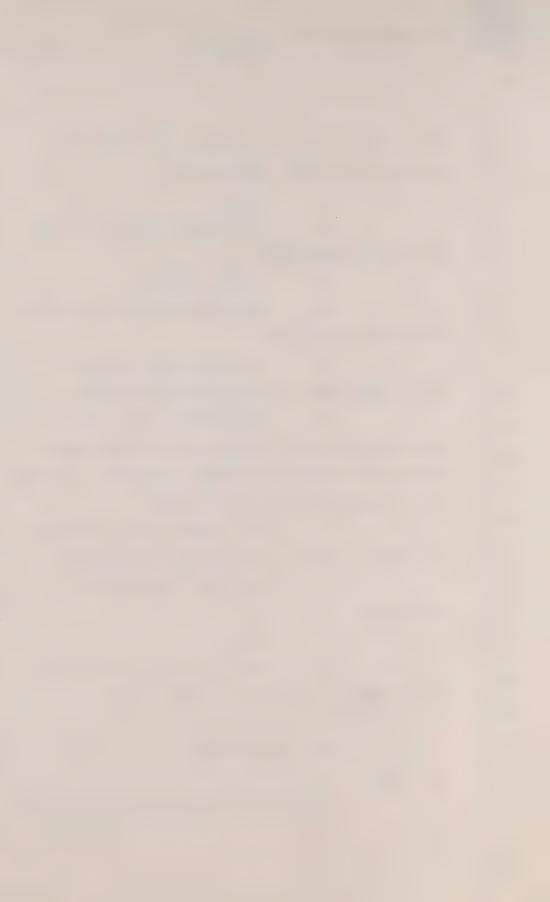
A. No.

THE COMMISSIONER: At some point,

Mr. Lamek.

MR. LAMEK: Oh yes, we take it earlier

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Scott, dr.ex. (Lamek)

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these days, yes. Well, this is as good a time as Bhv.

THE COMMISSIONER: Yes. We will take

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ning.

THE COMMISSIONER: Yes, Mr. Lamek. MR. LAMEK: Thank you, sir.

Mrs. Scott, when we broke, win ing to plot the chronology of the two hours prior to the arrest of Brian Gage.

A I understand it we have at least a couple of reasonably fixed points. That is to say we have from your nursing note, page 65 of the chart, that the baby apparently got into trouble at about 3:20, about five minutes after you sat him up to burp him and you settled him down again, and we know when that occurred. We also know from the flow sheet that you recorded the child's vital signs at or about 2 o'clock in the morning.

> Yes. A.

If I recall, I would like 0. to be clear about the preceding events, the events before 2 o'clock or thereabouts and the intervening events if we can between those vital signs being





recorded and the child getting into trouble.

Forgive me, I may have asked you some of these questions before but I have to ask them again.

Do you recall what period of time had elapsed between your coming back from lunch and Baby Gage getting into trouble at about 3:20?

- A. About an hour.
- O. About an hour?
- A. Or 50 minutes.
- Q. An hour, or a little less or a little more?
 - A. Yes.
- Q. Does that mean that if indeed the child got into trouble at about 3:20 in the morning, you got back from lunch at what, 2:10, 2:15, 2:20, something of that sort?
- A. Ten or 15 minutes past 2 to take his signs.
- Q. And would it be at that time that you took the child's vital signs that you recorded as the 2 o'clock vital signs?
 - A. Yes.
- Q. Do you have any recollection as to whether you took the normal length lunch break that night, 45 minutes being the average





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lunch break as you have told me?

A. Yes. There is no reason

43.

I am sorry?

A. There is no reason for me to than 40 minutes or more than 40 minutes.

Q. So your recollection is you took approximately 45 minutes, perhaps a little more the perhaps a little less?

A. Yes.

Q. And if that is so that would have you going off for lunch I take it somewhere between 1:30 and 1:45 something of that sort?

A. Yes.

Q. I'm sorry a little earlier than that 1:15 to 1:30?

A. Yes.

Q. 1:30 would bring you back at

about 2:15?

A. Yes.

Q. You would take the vital signs and then go off to look at the other children?

A. Yes.

Q. I ask you again when you left for lunch, do you have any recollection as to





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Scott, dr.ex. (Lamek)

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whether Mrs. Trayner was in the room?

A. I don't.

When you came back from lunch do you have any recollection as to whether Mrs.

Trayner was in the room?

No.

Do you recall whether you had any understanding as to whether Mrs. Trayner was to do anything with or for Baby Gage while you were at lumpon.

No.

Is it your recollection that she fed him at your request before you went to louch, did you see her feed him?

I don't know whether she fed him when I was at lunch or when I came back looking at Gage and went to the other room.

Q. You think, you are telling me you don't recall seeing her feeding him first of all?

A. I recall seeing her but not

THE COMMISSIONER: I am sorry, I missed

THE WITNESS: Not the time.

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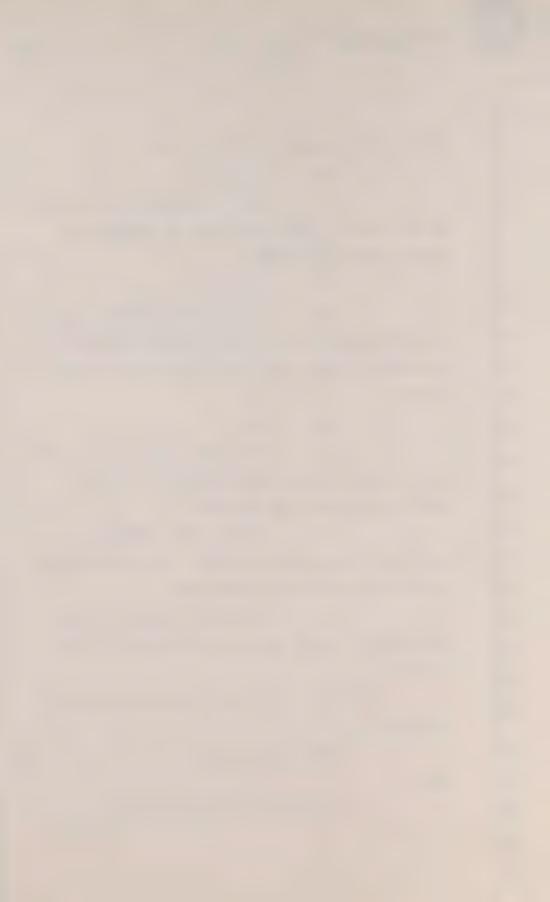
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THE COMMISSIONER: You recall seeing her feeding the baby, is that right?

THE WITNESS: Yes, but not the correct time.

into this chronology whether it was before you went to lunch or after you came back from lunch?

THE WITNESS: Most probably she was

feeding the baby when I finished my lunch and I was in the other room before 3.

THE COMMISSIONER: Before --

THE WITNESS: Before 3:15, before I

went bar-

THE COMMISSIONER: Yes, but you recall seeing her feeding the baby, is that right?

THE WITNESS: Yes.

THE COMMISSIONER: So obviously you must have been in the room at the time?

THE WITNESS: Yes, but I went in there and came out again.

MR. LAMEK: Q. You will have to bear with me for a moment, Mrs. Scott. Mrs. Scott, do you recall being interviewed by the police about Baby Brian Gage?

A. Yes.



Scott, dr.ex. (Lamek)

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MR. LAMEK: Mr. Commissioner, I don't have copies of this statement and it may become necessary to mark it.

Q. Mrs. Scott, I have a record of you are alleged to have told the police with respect to Brian Gage. You have looked over these statements and summaries, have you not?

A. Yes.

Q. You are recorded as having said to the police:

"I think it was Phyllis who fed him for me while I went on a break. I came back and Phyllis had looked after him".

Do you recall having said that to the

A. No.

Q. You have no recollection of

it?

police?

A. No.

Q. Do you have any present recollection as to whether Mrs. Trayner looked after Brian Gage while you were out on your break?

A. My memory at that time was fresher than now.





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It may be at some stage we may have to hear from the officer who interviewed you. Do you have any reason to think that he has misstated what you told them when he records you 8 g

> think it was Phyllis who fed him me while I went on a break, I back and Phyllis had looked after

you have any reason to think that what you have said?

No.

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But you have no present recollection of what happened while you were on your break?

No.

THE COMMISSIONER: It is a little different now, Mrs. Scott, because I thought you said a moment ago that you saw her actually feeding the baby. Do you remember now seeing that?

THE WITNESS: Yes. I remember seeing that but not whether when I was at lunch or after I had lunch.

THE COMMISSIONER: It is not quite the same as what you said to the police. You said when





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you came back that Phyllis had looked after him, but now you say that you can actually remember her feeding the baby, you just don't know what time, ismir that right?

THE WITNESS: Yes.

THE COMMISSIONER: I don't know whether I am making myself clear to you, I am not too sure that you realize the distinction. Which was it, had Phyllis finished feeding the baby, or was she still feeding the baby?

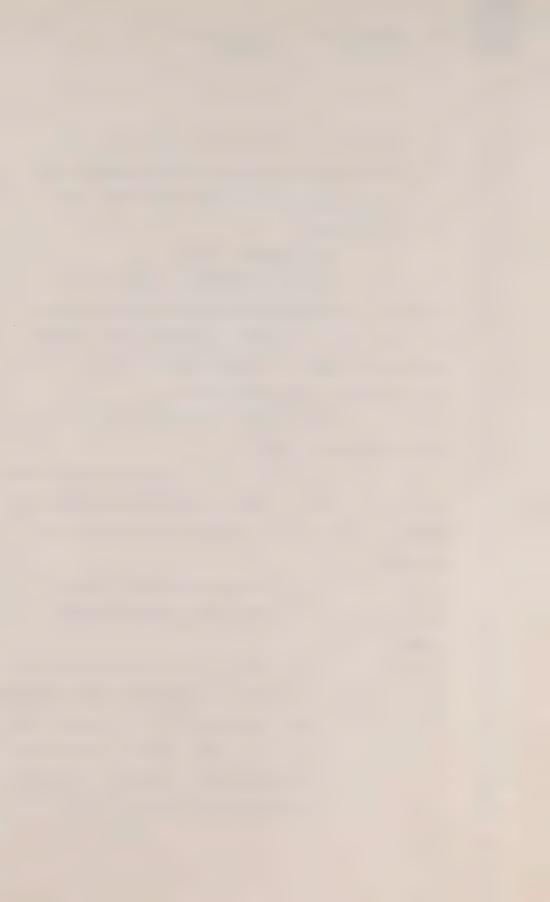
THE WITNESS: She was sitting on the chair feeding the baby.

MR. LAMEK: Q. And when you got back?

When I got back, at some point when I got back in the room and went out again to the other room.

You are recorded also as having said to the police with respect to Brian Gage:

> "We called a 25 and the team came with Dr. Jedeikin. He asked me what happened and I explained to him to explain when I went for lunch Phyllis took care of the baby and was supposed to feed him. I came back after lunch."



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Do you recall having said that to the

- A. Yes.
- Q. And was that true?
- Yes.

That Phyllis did indeed take care of the baby while you were at lunch and was supposed to feed him while you were at lunch, is that your recollection now?

- A. Yes.
- Q. Do I understand you to be saying this morning that although you recall seeing Phyllis actually feeding the baby, you don't know whether that was as you were going for lunch or when you came back from lunch, is that fair?
 - A. Yes.
- Q. But while you were away, is it your recollection, and tell me if it is not please, is it your recollection that Mrs.Trayner who had children in the room was going to look after Gage and feed him?
 - A. Can you say that --
 - Q. Is it your recollection,

as apparently you told the police, that while you were out at lunch Mrs. Trayner was going to look

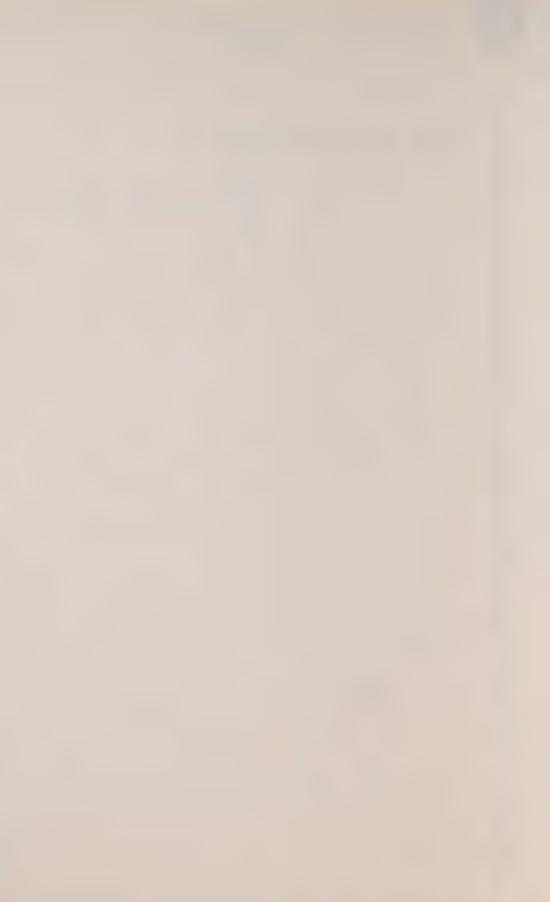


after Bab, 'in and feed him?

v . e Yes.

(Lamek)

Is that your recollection? Yes.





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Then you got back from lunch and it was that you saw Mrs. Trayner feeding

She was still feeding the baby room to go to the other room.

Is it your recollection that

ithstanding that she was feeding him vital signs?

I could not take his vital

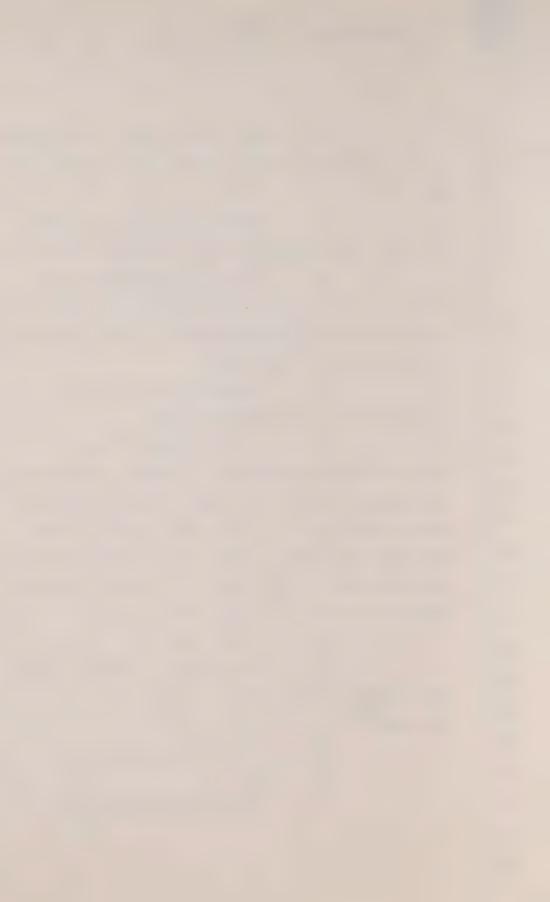
I would not have thought so.

it not? Either she was feeding him when you looked in, in which case you didn't take you looked in, in which case as you thought earlier you did take his vital signs then.

Now can you help us?

A. Most probably she fed the baby when I was at lunch because I could take his signs --

- O. Not while he was being fed?
- A. No.
- Q. I would not have thought so.



dr. ex. (Lamek)

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Is it possible then Mrs. Scott, that tion of seeing Mrs. Trayner feeding the twas happening as you were leaving for

- A. Yes.
- Q. That is possible?
- A. Yes.
- O. I know it is difficult to remember

sequence, but we do have certain

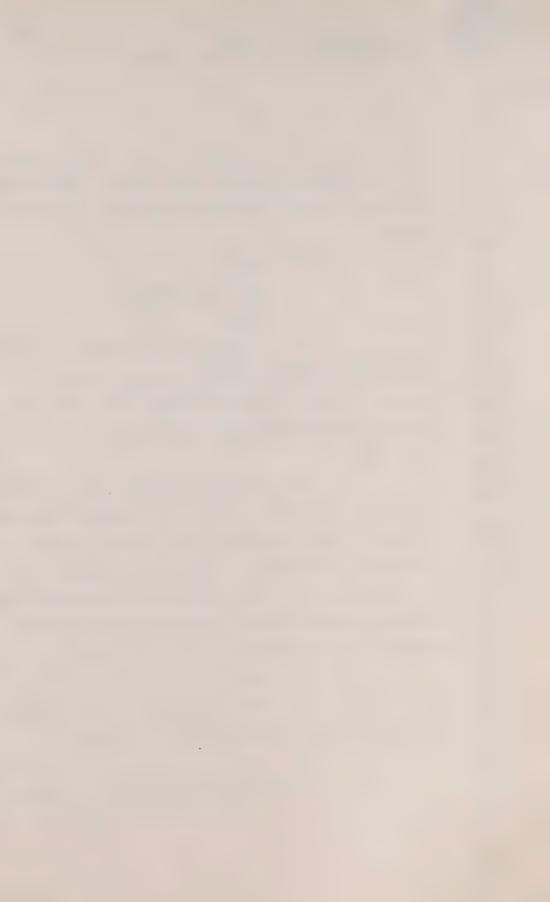
lacts we have got to take into effect like

lacts signs being taken at or about 2:00, do we

Now, when you came back, and you took those vital signs at or about 2:00, they are recorded on page 133 and they show a heart rate of 140 per minute and a respiration rate of 60 per minute. Is it fair to say that those appear to be consistent with the vital signs recorded earlier on your shift and indeed on the preceding shift for the child?

- A. Yes.
- O. Did he appear to be essentially the same as when you had left him for lunch?
 - A. Yes.
 - Q. He still appeared to be stable,

did he?



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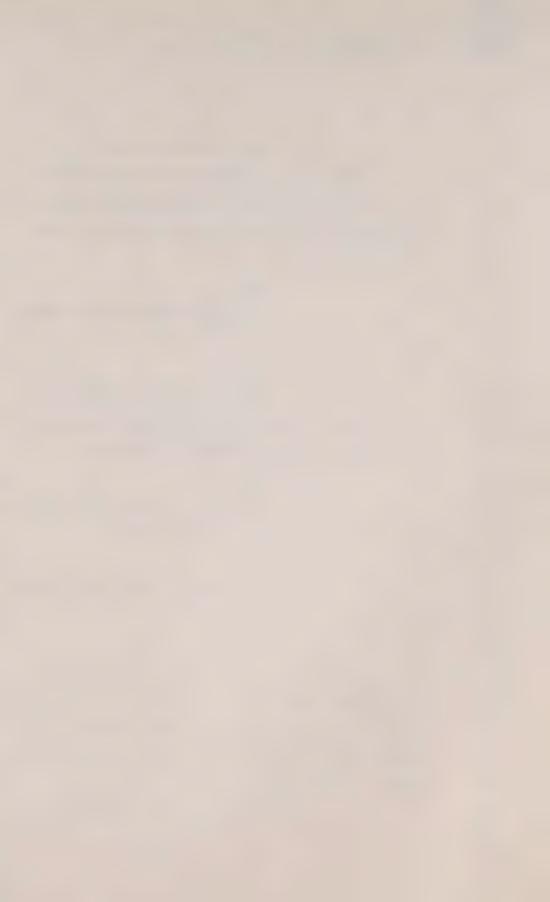
	Q .	And	the	n we	know	abo	ut 3	:15	or
3:10 you came	back	into	the :	room	and	you s	saw 1	nim	
there. You sai	id he	looke	da.	littl	.e un	comf	ortal	ole	and
you decided yo	ou wou	ıld si	t hi	m up	and	burp	him	and	
lid that?									

- A. Yes.
- Q. He looked around and he seemed
- A. Yes.
- Q. And you settled him down again and five minutes later you noticed from the monitor that his heart rate had dropped to about 49.
 - A. Yes.
- Q. So far as you were aware was that a sudden drop in the baby's heart rate?
 - A. Yes.
 - Q. An unexpected drop in his heart

rate?

alert?

- A. Yes.
- O. Prior to 3:20 in the morning had there been anything in that child's course during the shift that led you to think that he might be at serious and immediate risk of going into cardiac arrest?
 - A. Apart from his vomiting, no.



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	Q.	When	you	noticed that t	the heart
rate had	dropped to	49 as	you	recorded, was	there any-
one else	in the room	with	you	at that time?	

- A. Phyllis was.
- Q. And you called out for Susan

Welles to come?

that night?

A. Yes.

Q. Because she was a team leader

A. Yes.

Q. And then as we have said a code was called, the arrest team arrived and resuscitation efforts got under way.

The arrest note which is on page

66 of the chart, Mrs. Scott, seems to record that CPR

was started at 3:27, and at that time the apex had

dropped further down to 30 to 35. Do you see that?

A. Yes.

Q. Were you present during the resuscitation effort on this child?

A. Yes.

Q. What were you doing, do you

recall?

A. I don't.

Q. Do you recall who else was present



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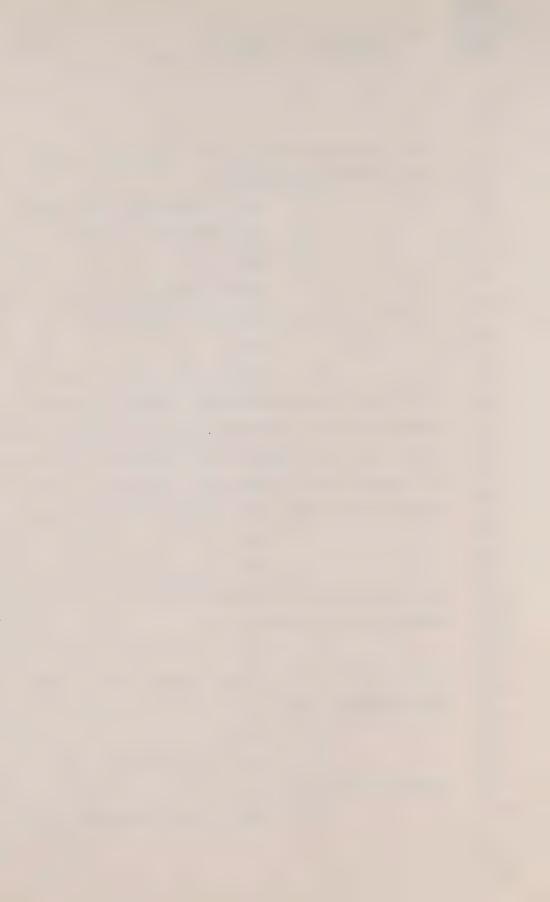
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ther	than	the	men	nbers	of	the	arrest	team?	What
ther	nurse	S We	ere	prese	ent?	·			

- A. No. I just recall the doctor.
- Q. And that was Dr. Jedeikin?
- A. Yes.
- O. And Dr. Jedeikin afterwards asked you what happened to the child, did he not?
 - A. Yes.
- Q. And you told him as indeed we read from the police statement and as you have now confirmed to us the child seemed fine, about an hour after lunch you picked him up to burp him, sat him up to burp him, put him down, and very shortly thereafterwards his heart rate dropped and he arrested?
 - A. Yes.
- Q. This baby could not be revived, of course, and was pronounced dead at 4:00 in the morning. Do you remember that?
 - A. Yes.
- Q. It also appears from page 66 of the chart that CPR stopped at 4:00.
 - A. Yes.
 - Q. Would you regard Baby Gage's
- death as unexpected?
 - A. Well, I didn't anticipate his



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death that night.

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Q. Mrs. Scott, do you recall any other children in the period about which we are talking (that is to say July of 1980 to March you recall any other children who

45 minutes, an hour, an hour and a quarter, after you came back from a break?

Α. They all seemed to take a turn for the worse after we came : back from breaks.

- I'm sorry, I didn't catch that.
- They all seemed to get worse after we came back from ...
- 0. They all seemed to get worse ifter you came back from breaks?
 - Α. Yes.
- Q. Can you remember any other particular child other than Gage who took that turn for the worse about an hour after you came back from break?
 - Estrella. Α.
 - 0. Estrella was another one, was

Α. And Gardner.

Okay. Let's go forward to those 0.

in just a moment, but maybe we could just look at the



intervening deaths (at least those on our chart), and I know you don't have much recollection of many of these children but let's just touch upon them as we go through.

Following the death of Brian Gage you were not on duty for the death of Richard McKeil on October 15th or for the death of Antonio Adamo on October 19th.

I take it you learned of those deaths when you next came back on duty after each respective one?

- A. Yes.
- Q. Did you have enough information about either of those children to form a view as to whether death was expected or unexpected?
 - A. No.
- Q. Did you form any impression from other nurses on the floor or from doctors as to whether either of those deaths were unexpected or surprising?
 - A. No.
 - Q. That is true of both Adamo and
- McKeil?
- A. Yes.
- O. Similarly you were not on duty



when -- let's eliminate these -- when Real Gosselin died on December 18th or when Stephanie Lombardo died on December 23rd? Moving back up the list to December 9 when John Onofre died on Ward 4B you were on duty on Ward 4A.

Do you have any recollection of any of those children, notwithstanding you were not present on the ward at the time of their deaths?

A. No.

Q. You were on duty on Ward 4A for the long night November 16-17 when Matthew Lutes died. Again you were not assigned to care for that child that night. Miss Nelles was.

Do you have any recollection of that patient, Matthew Lutes?

A. No.

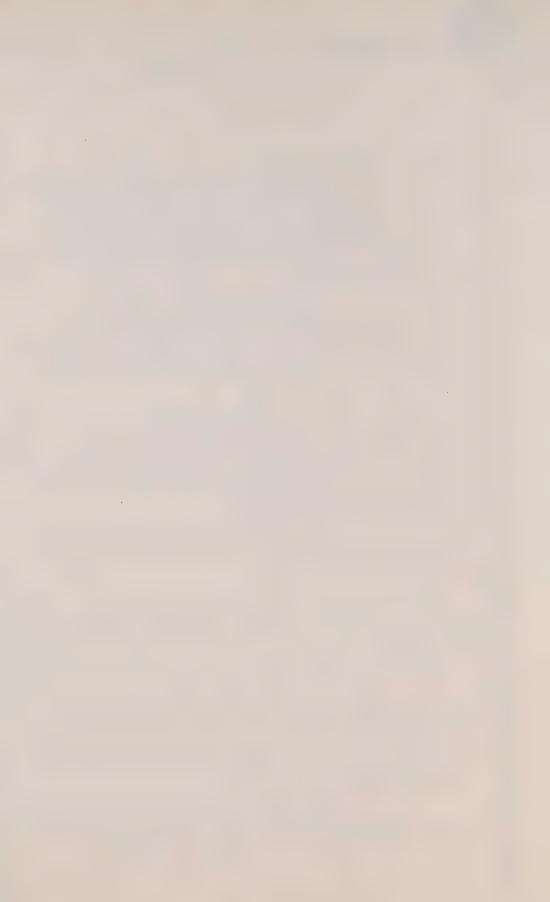
O. Or of the events of the night of

his death?

A. No.

O. You were on duty when Darcy
MacDonald died on December 13th, in the early hours
of December 13th. And again you were not assigned to
care for that child.

Do you have any recollection of that child and the events the night of her death?



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Q. Now, Jesse Boulanger died in the

No.

early evening of December 28. Do you see that? At 8:16 in the evening. She had died in a room that is located on Ward 4B but am I right in thinking that Ward 4A and 4B were combined or merged over the Christmas-New Year period?

A. Yes.

Q. And although you were on duty notionally on 4A, in fact the whole cardiac unit was being treated as a single ward?

A. Yes.

Q. For that period, wasn't it?

A. Yes.

Q. And again you were not caring for that child. It was Susan Reaper's patient that night. But you and Mrs. Trayner and Susan Reaper had worked indeed the long day shift, had you not? The child died at 8:00 in the evening and you had gone off duty at about 7:30 I think.

A. Yes.

Q. And Nurse Reaper had been assigned to care for the child.

A. Yes.

Q. Do you have any recollection of





Baby Belanger?

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Α. No.

O. Or of the events of the latter part of the shift shortly before he arrested and

> Α. No.

Well then let's go to Janice Estrella. The night that Janice Estrella died you were assigned to provide constant nursing care for her, were you not?

> Yes. Α.

O. As indeed you had been the night

Α. Yes.

Q. Two nights in a row Janice Estrella was on constant care and you were providing

On the night of January 10 to 11, Janice Estrella was in Room 423. Do you recall that?

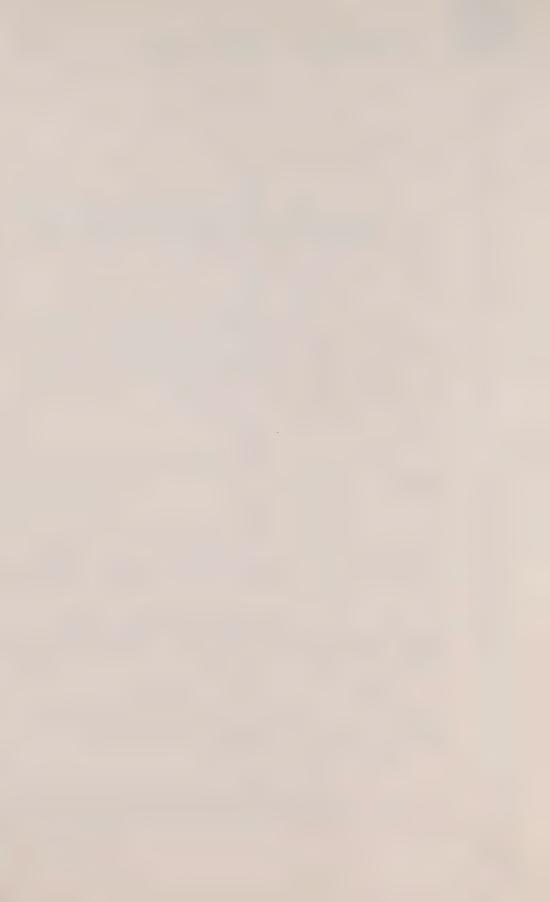
> A. Yes.

O. She was alone in that room:

there was no other patient there, was there?

Α. No.

As we can see from the chart the other nurses on duty on 4A that night were Phyllis



Trayner, Marianne Christie and Janet Brownless, and



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on 4B there was Bertha Bell, Debbie Harwood Jones, Shirley Ann Parcels and Meredith Frise. Do I have that correctly?

that night.

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Yes.

0. Susan Nelles was not working

Α. No.

Now this is the first case we have looked at where you were assigned to constant care nursing for any of these children at the time of death. I want to ask you something about constant nursing care first if I may.

We have heard evidence here. Scott, that only RN's are assigned to provide constant nursing care on the cardiology service.

> Yes. A.

Is that true?

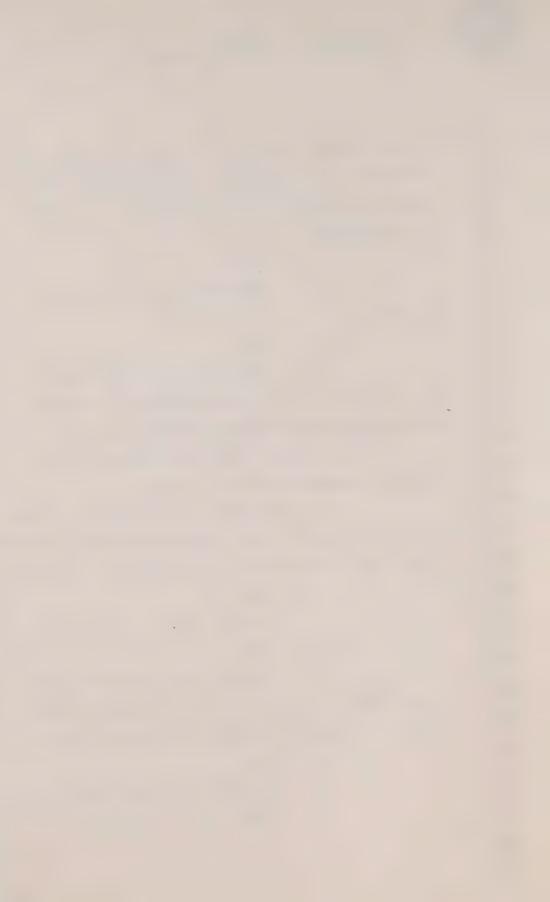
A . Yes.

Q. We have heard also that usually a nurse who was providing constant nursing care was relieved for breaks by another registered nurse.

> Yes. Α.

Was that your experience? 0.

Α. Yes.





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Q. When I say for breaks I don't meam
ng across to the utility room to get a
mething. I am talking about coffee

A. Yes.

O. Do you ever recall being relieved an RNA when you were assigned to constant

A. Not for coffee breaks or lunch

Q. All right. Is the same true of nursing care? If you were on shared nursing did you need to be relieved for breaks --

A. By an RN.

Q. By an RN? And do you remember any occasion when you were doing shared nursing care when an RNA relieved you for a break?

A. No.

Q. All right. Focussing on night duty, was there one RN on your team -- there were three RN's on your team: yourself, Mrs. Trayner and Miss Nelles.

A. Yes.

Q. Were the regular RN's on that

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team?





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Α. Yes.

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From time to time someone else 0. might come on as a relief?

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Α. Yes.

6 7

Of the three regular RN's on the eam was there one who relieved you more frequently than others when you were on constant care or shared car .

8 Q

A. The team leader.

10.

And that I take it is a

11

perfectly normal thing.

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Α. Yes.

13

Because a team leader very often doesn't have patients assigned to herself.

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Α. Yes.

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0. And she is therefore free to

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relieve you?

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Yes. Α.

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How would the team leader know 0.

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when you want a break?

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I would let her know.

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You would let her know? All right.

Do you have to call her and ask to be relieved?

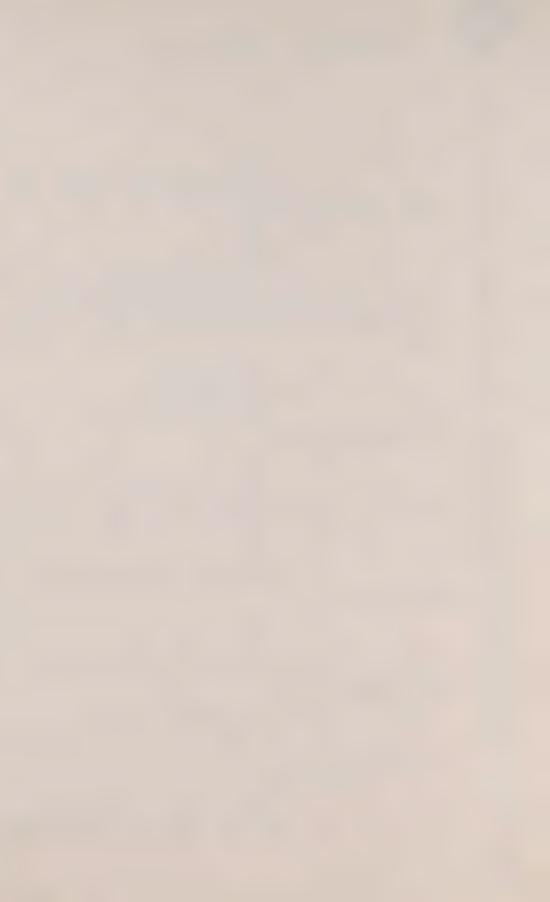
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Yes. Α.

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0. You have told us when you normally,

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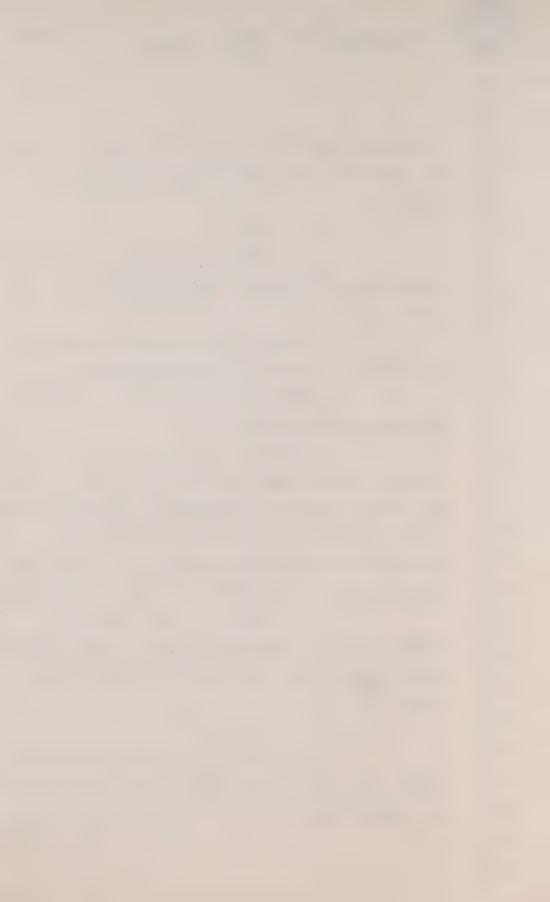


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14	2	roughly when you normally took your breaks at night:
	3	10, 10:30 for coffee and 1:30 or thereabouts for
	4	Inter-
	5	A. Yes.
	6	Q. Let's go back then to the night
	, 	Janice Estrella died, the night of January 10 to 11,
	7	1381.
	8	You were providing constant care for
	9	her and she was the only patient in Room 423.
	10	Perhaps, Mr. Registrar, we could have
	11	the chart for Mrs. Scott?
	12	Now your nursing note for the relevant
	13	night is found at page 128, Mrs. Scott. Can you give
	,	me, please, assisted if necessary by reference to your
	14	note of that night, could you give me your best
	15	recollection of the child's condition and course for
	16 1	the first part of the shift until 2:40 in the morning?
	17	A. She was her signs were
	18	stable, but her respirations had been she had been
	19	having trouble with respirations even before that
	20	night.
	1	Q. Yes.
	21	A. But she was stable and she was
	22:	guiet She was only irritable when you disturbed her

for nursing care.

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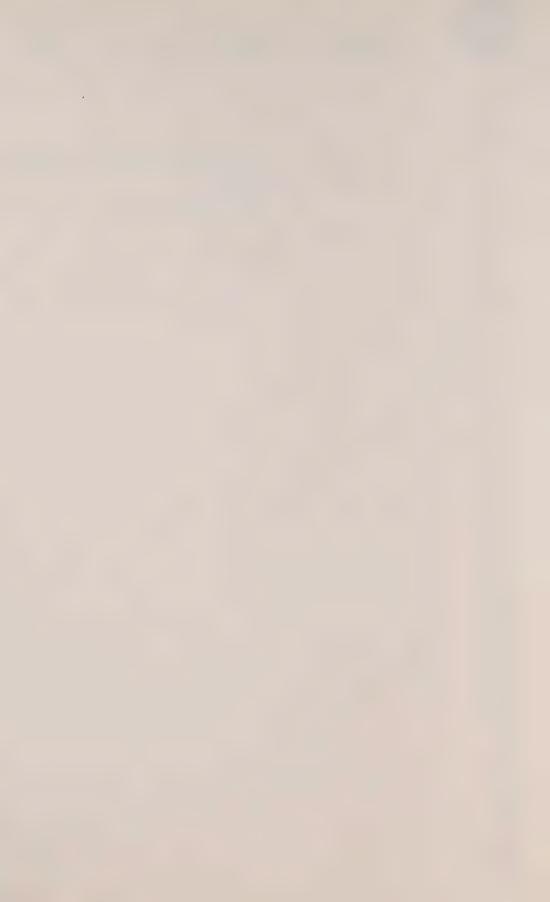
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). If you disturbed her for nursing

net irritable?

A. She would cry, yes.





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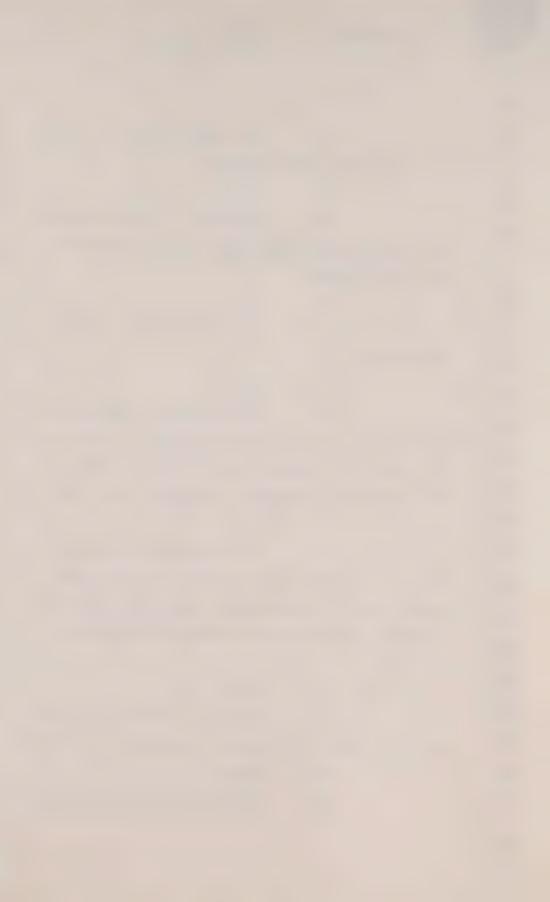
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	Q.	But otherwise	did	she	appear
-	onably well	settled?			

- A . Yes.
- 0. And calm? Now, you say she le with respiration, she was breathing fas and she not?
 - Α. Yes.
- And had been for a couple of 0. Any I think?
 - Α. Yes.
- If one were to look back to 0. your nursing note of the night before, I think it page 125, respirations 87 to 69, mostly in the 70s and 80s, remained tachypneic all night.
 - Yes. Α.
- Fast breathing the night 0. before. The day shift note on page 126 by Nurse Ganassin said the same thing, respiration remains tachypneic, and that continued on the night that she died.
 - A. Yes.
- But you record her apex as 0. being 142 and 114 and regular throughout and strong.
 - Yes. A.
 - But clearly Estrella was not 0.



Scott dr.ex. (Lamek)

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a well baby, was she?

Α.

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 Ω_{\circ} She was having this fast breathing, prolonged episode of fast breathing over a couple of days. She had an elevated temperature on the night of January 10, did she not?

No.

A. Yes.

Q. It was slightly elevated.

You record her at one point as being rather clammy or sweaty and a bit irritable you said when she was disturbed.

A. Yes.

Ω. And indeed the child was sick enough to have been on constant care since January 7th, isn't that right?

A. Yes.

Q. Okay. Now, having so described her condition while you were with her on the night of January 10th, did her condition remain essentially the same from the beginning of the shift until she got into trouble at about 2:40?

A. Yes.

 Ω . So, in that sense, and I put it no higher than that, but in that sense she was stable, that is, her condition wasn't changing,

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A. No.

Q. Okay. I take it you saw indications of bradycardia until 2:40 in the

A. Yes.

 Ω . Am I right in saying that?

A. Yes.

O. Okay. No sign of any drop in blood pressure until 2:40 in the morning?

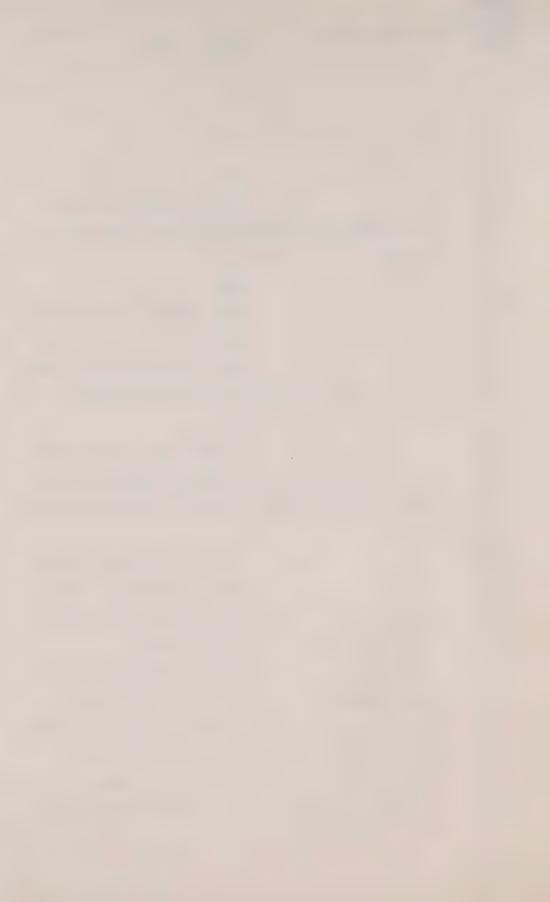
A. No.

Q. At any time prior to 2:40 in the morning, did you have any cause to be concerned that Baby Estrella might not make it through the night?

A. I had no immediate concern.

Q. Now, if one were to turn back to page 126 in the chart, there is a note by Dr. Tucker; that's on cardiac arrest.

At the bottom of the page -- well there are two page 126s, interestingly, but the first page 126 there is another note by Dr. Tucker at the bottom of the page, that is the one I am directing you to at the moment. It seems to be Jan 10th, 1981, 2330, 11:30 at night. Do you see



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that I am referring to?

A. Yes.

Ω. Do you recall Dr. Tucker

the child's room at 11:30 at night?

A. Yes.

Q. Do you know what brought

Tucker there at that time?

A. She just came in. It is not unusual for them to come in before they settle, they retire for the night.

Q. Okay.

THE COMMISSIONER: I'm sorry, I

missed that.

THE WITNESS: It is not unusual for them to come in before they retire for the night.

THE COMMISSIONER: Yes. Dr. Tucker,

he would be a resident I take it?

THE WITNESS: Yes.

THE COMMISSIONER: He would be

spending the night --

THE WITNESS: I think she is a 'she',

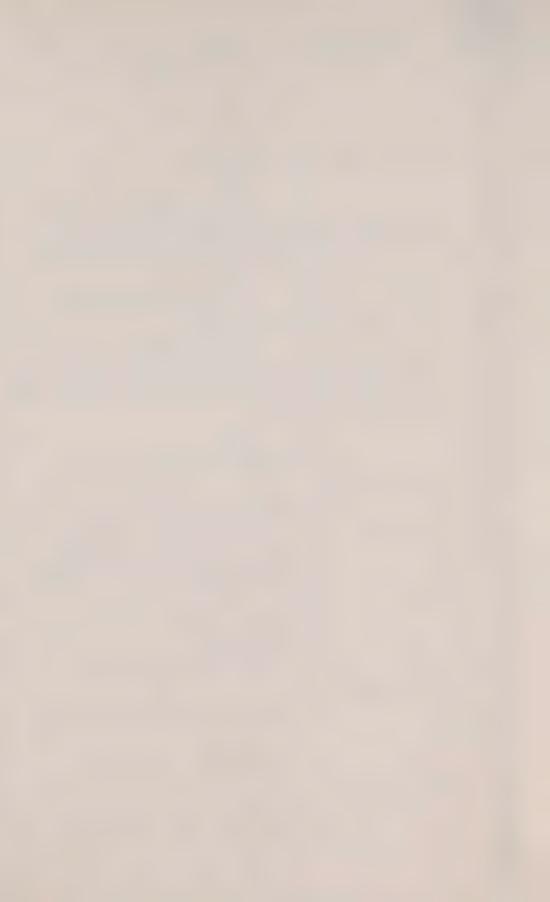
sir.

THE COMMISSIONER: It is a she, I

beg your pardon.

THE WITNESS: I think she was the

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resident on call that night.

THE COMMISSIONER: Yes. And that would mean staying in the Hospital?

THE WITNESS: Yes.

THE COMMISSIONER: On the ward?

THE WITNESS: Yes, yes.

THE COMMISSIONER: Not on the ward,

but wherever they stay.

THE WITNESS: Not on the ward, yes.

MR. LAMEK: Q. Dr. Tucker records at 11:30 the child's heart doesn't seem to be fevered, respiratory rate is still elevated, chest is clear, and I have to tell you that I can't read the next word, can you help me?

A. Abdomen soft.

Q. Oh, I can read that one, it is at the end of the line before that one, can you help me with that one?

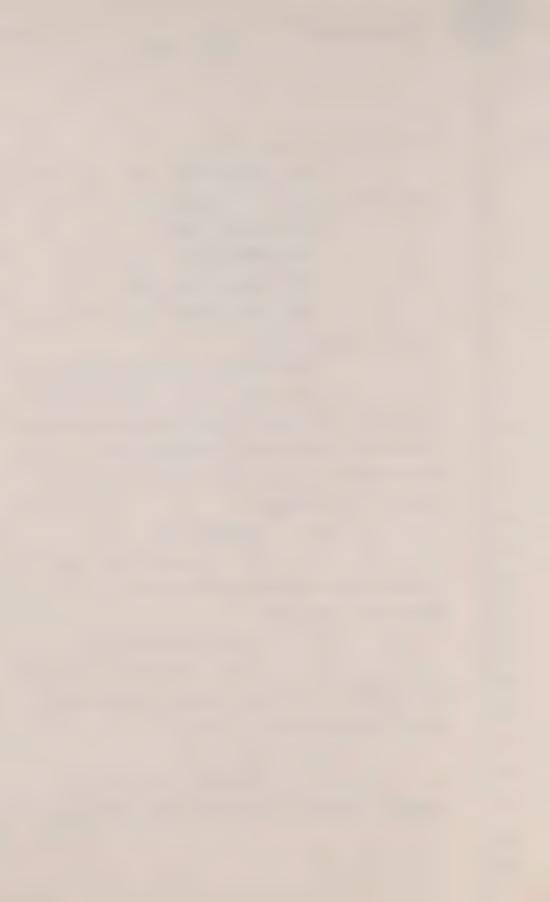
A. I can't read it either.

Q. Okay. The abdomen is soft and the liver is one centimetre down from the costal margin, the costal rib, I take it?

A. Yes.

Q. The baby is sucking on a soother, stable, no signs of failure. Did that

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your observations of the child in the

Yes.

Now, from pages 214 to 215

the flow sheet, it appears that

8 o'clock, 2000 hours, bottom of page

were taking vital signs hourly?

A. Yes.

Q. Except at 10:30 the last

Intry on page 214, can you tell me what times those

Viii is no were taken. There is a 2300 and then

there is a 2330 written in above it.

A. Oh, I took the respiration rate every half hour, I was a bit concerned, it went to 90.

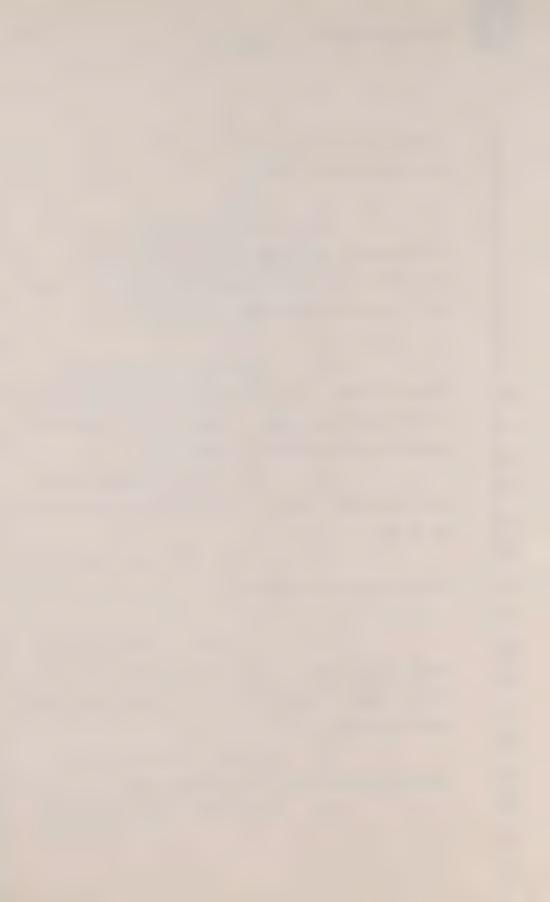
Q. I see, okay. And then full vital signs on the hour?

A. Yes.

Q. All right. Vital signs are being taken hourly on this child. What breaks did you have on that shift prior to the time of the baby's arrest?

A. Between 10 and 10:30 for coffee and 1:30 to 2 for my lunch break.

Q. Okay. Now, are you telling







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me the times that you normally took them or do you recall that those were the times that you took on that particular night?

A. I recall.

Q. All right. So, you took a coffee break at 10 to 10:30 you said?

A. After I had given the medication at 10 o'clock.

Q. You gave medications at 10 o'clock, and that's at page 53, let's take a look at it, Mrs. Scott. The med sheet on page 53 shows that at 10 o'clock you gave aldactazide?

A. Yes.

Q. And you signed for that at 10 o'clock. Did you in fact administer that drug yourself?

A. Yes.

Q. At 10?

A. Well, five minutes.

Q. All right, at 10 or thereabouts?

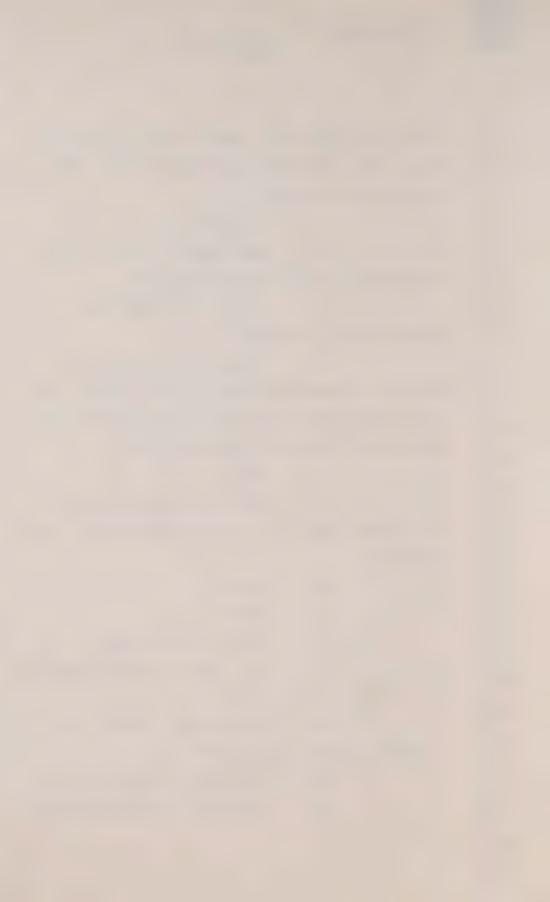
A. Yes.

Q. And it also records that at

midnight you gave ampicillin?

A. No, not at midnight, 1:30.

Q. Oh, okay. It is recorded as





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ur name you've got 0130?

Yes.

And that records that you gave,

ht dose at 1:30?

Yes.

And is that a precise time

- 1 administration, 1:30?

Yes.

Do you recall why the midnight

130?

Because the 1800 dose wasn't leaven and I had to give it at 7:30 in the evening.

U. All right.

A. So, to bring it up to every

318 hours

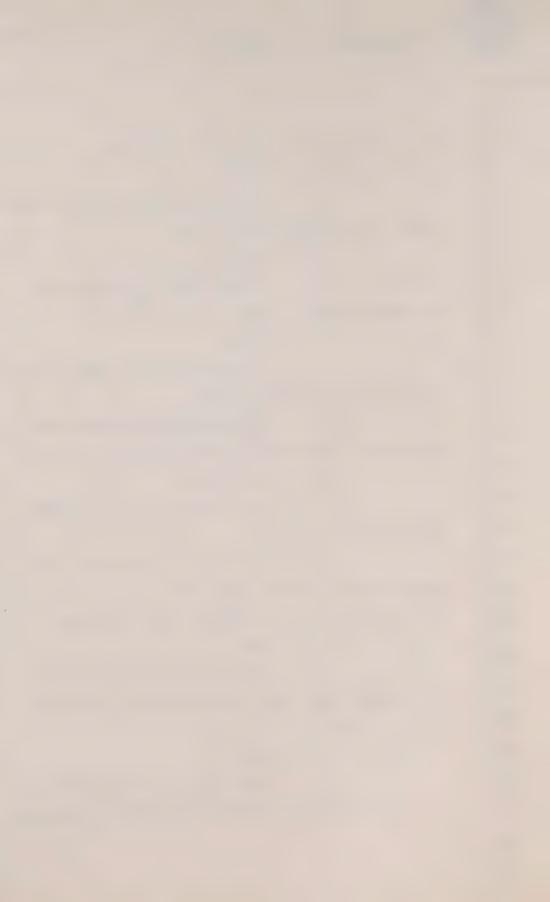
Q. All right. The order as it imports in the second column from the left is 068, the ampicillin to be given every six hours.

A. Yes.

Q. And as you correctly point out the 6 o'clock dose appears to have been given by you at 7:30?

A. Yes.

Q. All right. And therefore you took your six hours from that and gave the next dose



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Α. VAS

Now, the vital signs which are it was as having been recorded/at 10 and 10:30 and then 11. What about the 10:30, respiration rate. Do you recall whether you took that before or after you went on your break?

A. No, I came back after my doller break and I saw he was breathing fast, that's why I took it.

Q. All right. And that helps you I take it to fix the time you went for your coffee leeak?

> Α. Yes.

All right. Who relieved you 0. for your coffee break?

Phyllis Trayner.

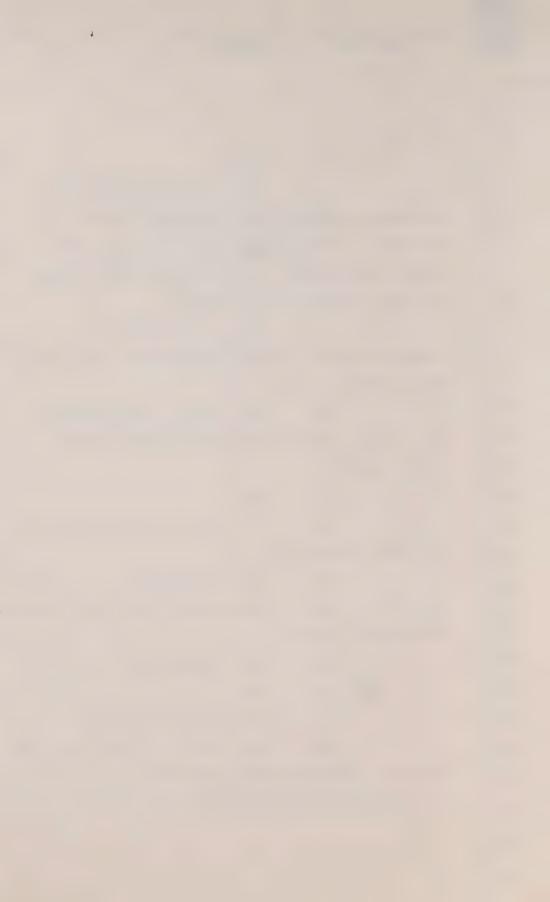
Do you recall how long you were 0. out on that break?

> The coffee break? Α.

0. Yes.

The usual, 25 minutes.

All right. So far as you know 0. was Mrs. Trayner with Baby Estrella all the time you were on that coffee break?







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Janet Brownless might have in and talked to her, I don't know.

All right. The child was on

I take it therefore that whoever

should have been with the child

ime you were away?

Yes.

Do you have any basis for he was not with that child, Mrs.

on which the coffee break?

At lunch time?

No, at coffee break first of

A. Oh, no.

Q. All right. Was anyone else in the room when you left other than Mrs. Trayner?

A. I think, I am not sure, Janet

Brownless came.

Q. Okay, just about the time you

were leaving?

A. Yes.

Q. Was anyone in the room other than Mrs. Trayner when you returned from your coffee break?



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A.	No	
A .	No	

Q. All right. And you got back as you have said about 10:30 and took the half hour respiratory rate on Janice Estrella?

A. Yes.

Q. Now, from the time you came back from your coffee break until you went for lunch were you with the child constantly?

A. Yes.

Q. Okay. Did anyone else come into the room in that period?

A. Yes.

Q. Who came in?

A. Phyllis Trayner.

Q. How frequently did she come

into the room?

A. She might come in more times but she came in twice and asked me whether I would like to stretch my legs.

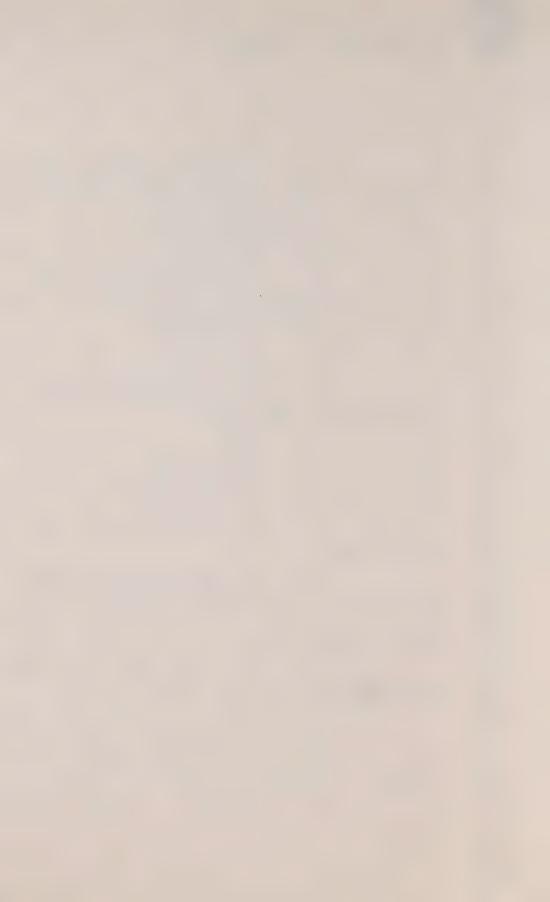
Q. All right. This was not your lunch break she was talking about?

A. No.

Q. Did you take her up on the

offer?

A. No.



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	Q.	Okay.	When Mrs.	Trayner	came
into the	room on th	nose two o	occasions v	were you	in
the room	at the sam	ne time?			

A. Yes.

And you stayed in the room?

A. Yes.

And she left then?

Yes.

Q. Okay. Other than Mrs. Trayner coming in to offer to give you a chance to go out and stretch your legs, did anyone else come into the room between your return from coffee break and you going off for lunch?

A. Janet Brownless just came to the door and talked to me to say high.

Q. Okay. Did you stay in the room throughout the time that she was visiting?

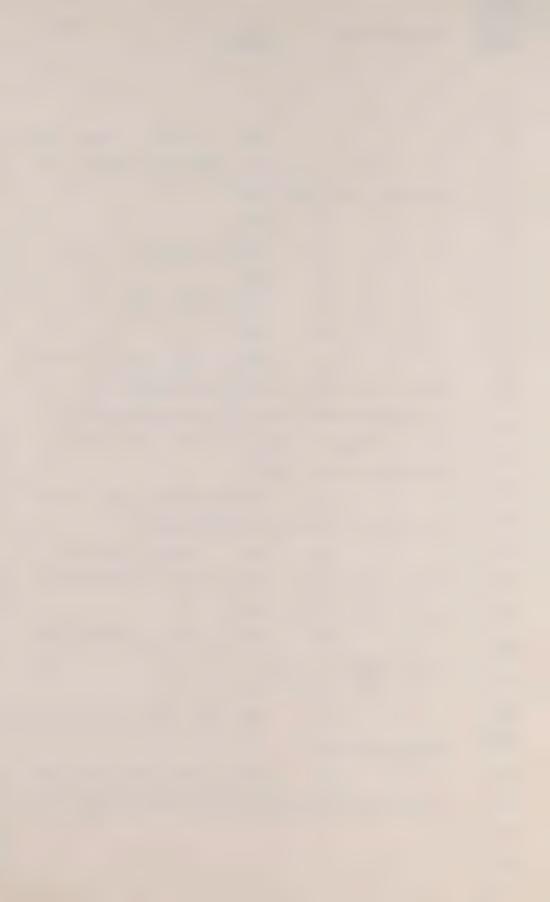
A. Yes.

Q. Okay. Now, we know that you gave ampicillin at 1:30?

A. Yes.

Q. Was that before you went on your lunch break?

A. Phyllis came and then I went out and got my ampicillin, went back and put it in





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break.

in?

right.

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the buretrol and then went for my lunch break.

Q. Okay.

THE COMMISSIONER: I am sorry, you will have to say that again.

The question was, was this before or after your lunch break and you said something about Phyllis Trayner.

THE WITNESS: Before, before my lunch

THE COMMISSIONER: Phyllis Trayner came

THE WITNESS: Phyllis Trayner came in earlier and then I went out of the room.

THE COMMISSIONER: Yes.

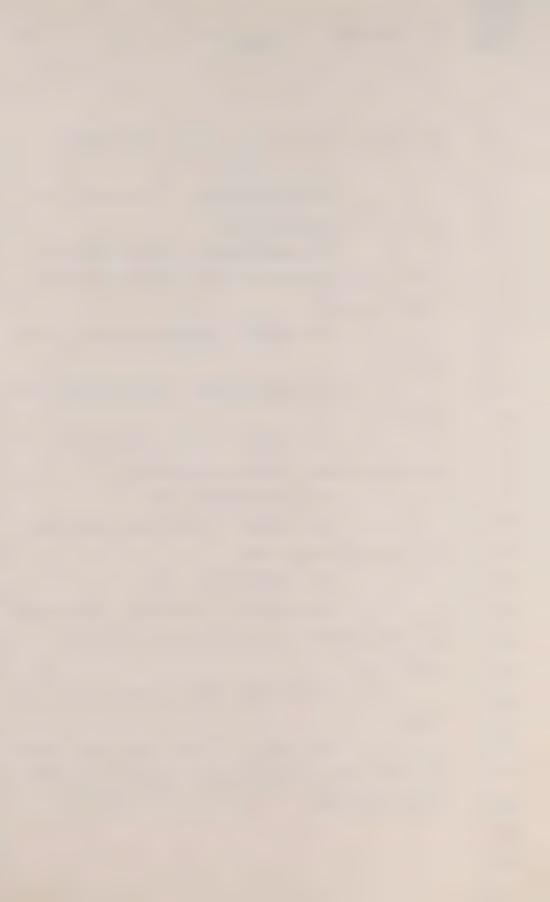
THE WITNESS: To get the medication from the medication room.

THE COMMISSIONER: Yes.

THE WITNESS: I went back to the room and gave the medication and then left for my lunch.

THE COMMISSIONER: I see, yes, all

MR. LAMEK: Q. Now, when Mrs. Trayner came into the room did she come to relieve you for your lunch break?



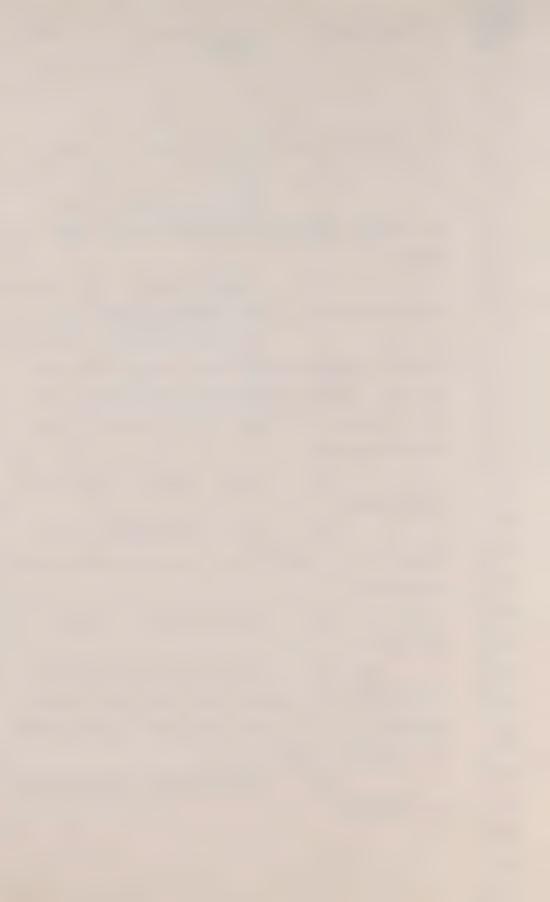


	** M B # "			Lamek)
	1			
14	2		Α.	Yes, yes.
	3			
	3	ammi silli a	Q.	And you went out to get the
	4			edication room?
ļ	5		A.	Yes.
	6		Q.	And went back to 423 with
	7	the ampicillin	1?	
			Α.	Yes.
	8		Q.	And administered it into the
	9	buretrol?		
	10		Α.	Yes.
	11		Q.	And then left for lunch?
	12		A.	Yes.
1			Q.	Now, we know the administration
1	13	as you have sa	id was	at 1:30. Do I take it there-
	14	fore that you	left for	r lunch immediately after
	15	1:30?		
	16		Α.	Yes.
	17		Q.	Where did you go for your
		lunch break th		
	18		Α.	At the back of the nursing
1	19		110	ne the back of the harsing
•	20	station.		
	21		Q.	Had you brought your lunch
72		from home?		
	22		Α.	Yes.
	23		Q.	So, you didn't have to go





1	
2	downstairs or anything to get something to eat?
3	A. No.
4	Q. Were there other nurses at
5	the nursing station when you got there for your
6	lunch?
	A. I think it was - I can remember
7	Mrs. Christie but I can't remember anybody else.
8	Q. You can remember Mrs. Christie,
9	you can't remember anyone else. Now, do you mean
10	you can't remember anyone else being there or you
11	can't remember the names of other people who may
12	have been there?
13	A. I can't remember anybody else
14	being there.
	Q. Do you recall anyone else
15	coming to the nursing station while you were having
16	your lunch?
17	A. Phyllis Trayner at about
18	2 o'clock.
19	Q. Okay. Well, I will come to
20	that in a moment. Anyone other than Mrs. Trayner
21	at about 2 o'clock. Were there other nurses around
22	the nursing station?
23	A. There were but I can't remember
24	who they were.



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	Q.		Okay.	Now,	you	have	told	us
the lumb br	reak	was	normally	on	the	avera	ge abo	out
45 minutes.								

- A. Yes.
- Q. It might be a little less,

it will be a little more?

A. Yes.

Q. But you also told me that your lauch break that night was, what, about a half

A. Yes.

Q. You said you left at about

1:30 and came back around 2?

A. Yes

Q. You said a moment ago that Phyllis Trayner came to the nursing station while you were out there?

A. Yes.

Q. What time was that?

A. Oh, about 5 to 2 or 2 o'clock.

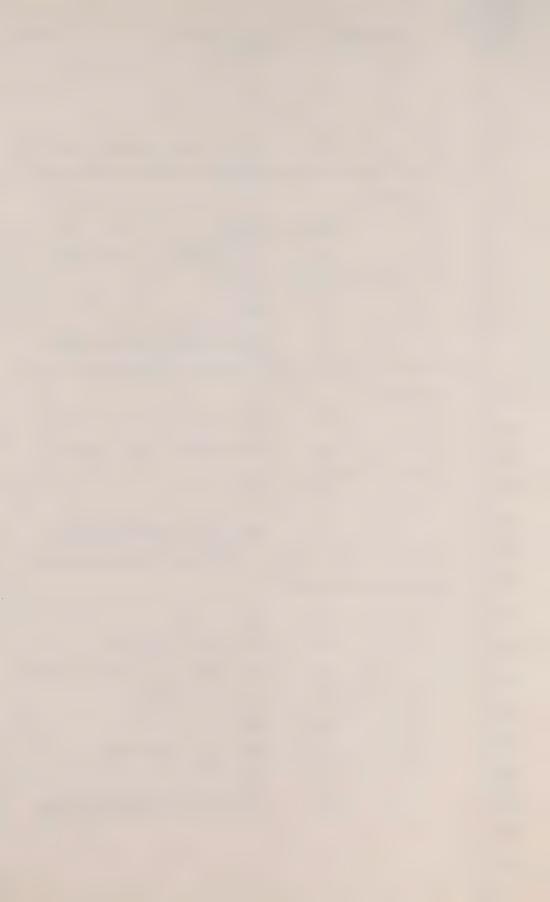
Q. About 2 o'clock?

A. Yes.

Q. Were you surprised?

A. Yes.

Q. Did you think that she would



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be in Estrella's room looking after her while you were having lunch?

Well, she didn't give me time to be surprised, she came in and turned on the intercom and said oh, we can hear Estrella from the intercom and then she sat down and started to do some writing.

So, Mrs. Trayner, came, what, to the front of the nursing station or the back?

- Α. Yes, the desk.
- 0. Went to the desk at the front and you saw her when she got there?
 - Α. I was at the back, ves.
 - And she turned on the intercom? Q.
 - The intercom, yes. A.
 - And is that an intercom to each 0.

To all of the rooms, yes. A.

0. And she said we will be able

to hear Estrella?

intercom.

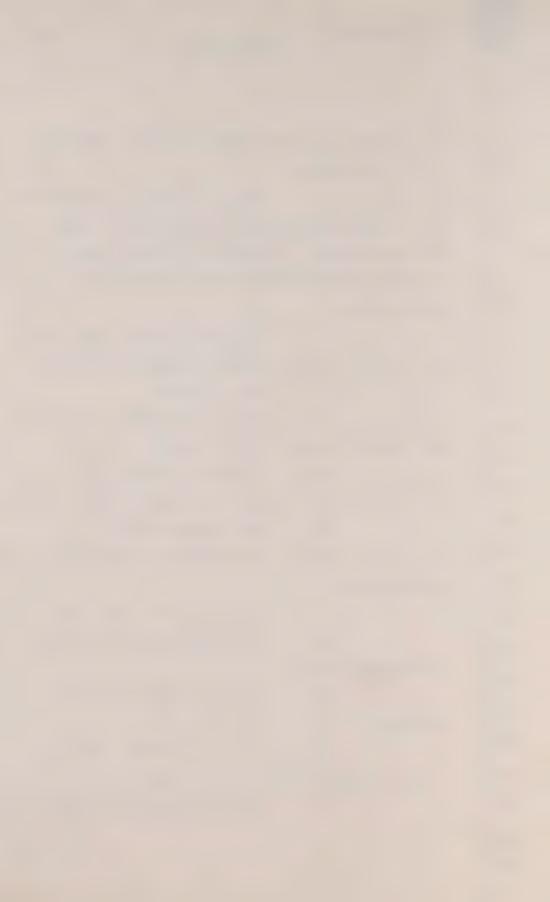
of the rooms?

A. Yes, hear Estrella on the

On the intercom. And she 0.

started to do some work at the desk?

Well, she started sitting down. A.



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say?

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I saw her from the back.

Q. All right. And what did you

A. Well, I felt quite uneasy leaving Estrella in the room all by herself down the corridor.

Q. I'm sorry, you said you felt uneasy leaving Estrella alone?

A. Yes.

Q. Yes.

A. So, I poured myself another cup of coffee and I went back.

Q. So, you poured another cup of coffee and went back to Room 423?

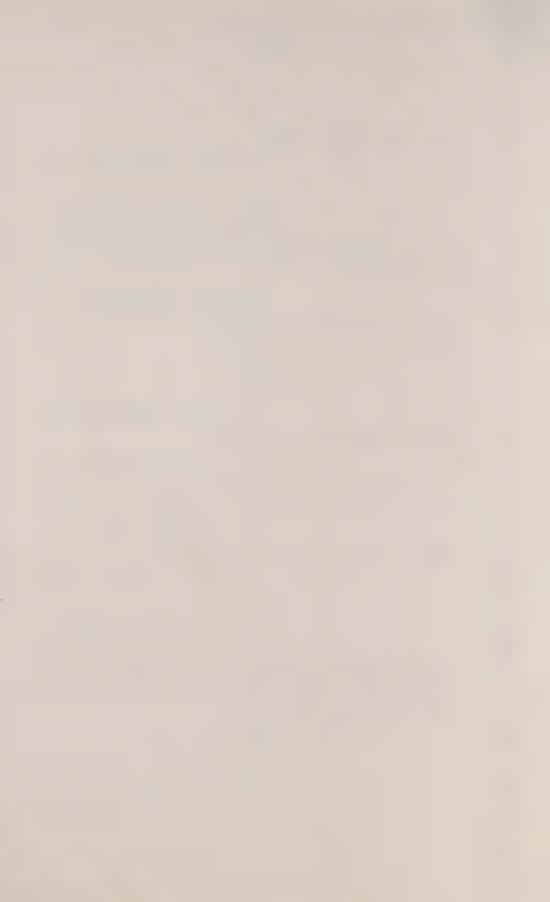
A. Yes, I told her that it is Okay, I want to finish my book anyway.

Q. You told Mrs. Trayner that?

A. Yes.

Q. Was it unusual for someone who was providing nursing care or supposed to be relieving on constant care to leave the child alone in your experience?

A. No.



	A E M B E			(Lamek)
DM.jc	1			
1				
	2		Q.	That is not unusual?
	3		Α.	Yes.
	4		Q.	It is unusual?
	5		Α.	Yes.
1	6		Q.	For a child who is receiving
1	7	dum rero tre	to be 1	eft entirely alone?
1			A.	Yes.
•	8		Q.	I recognize that Mrs. Trayner
1	9	was your ceam	leader,	but did you remonstrate with
	10	her = = 12, di	d you s	ay what are you doing leaving
•	11	my lens alo	ne?	
	12		A.	No.
•	13		Q.	Did you report that incident to
	F	anybody:		
	14		A.	No.
	15		Q.	But it obviously, from what you
	16	said made you	uneasy	that the child was left alone?
,	17		A.	Yes.
	18		Q.	You poured yourself another
	19	cup of coffee	and you	went back to Room 423?
			Α.	Yes.
	20		Q.	Now, when you got there, how
4	21	was the baby?		
1	22		Α.	She was all right, no change.
•	23		Q.	Was it on your return from lunch
	24			



different



A E M D L	ANGUS, STONEHOUSE & CO. LTD. TORONTO, ONTARIO	Scott, dr.ex. (Lamek)	6870
J.2			
1			
2	that you did the chi	ld's 2 o'clock vital sign	s?
3	Α.	Yes. Not exactly two,	
4	could be five or ten		
5	Q.	When you returned from	the
6	r Wallag A Calling?		
7	A	Yes.	
	Q.	And there found at page	214,
8	215, page 215 you red	cord the child's 2 o'cloc	k vital
9	Elgh: as being: "temp	perature 37.4" which was	down a
10	tit from the earlier	elevation in the evening	9
11	"Rescallion" I'm	sorry, "heart rate 127;	
12	empionti a 78°.		
13	A.	Yes.	
14	Ω.	Vital signs not greatly	
15		ecorded earlier in the sha	ift, is
1	that fair?		
16	A.	No.	
17	Q.	Did the child appear to	
40	essentially the same	as she had been in the fi	rst

o be first part of the shift?

> A. ·Yes.

And that was approximately Q.

2 o'clock?

Yes. A.

And then what happened? Q.

22

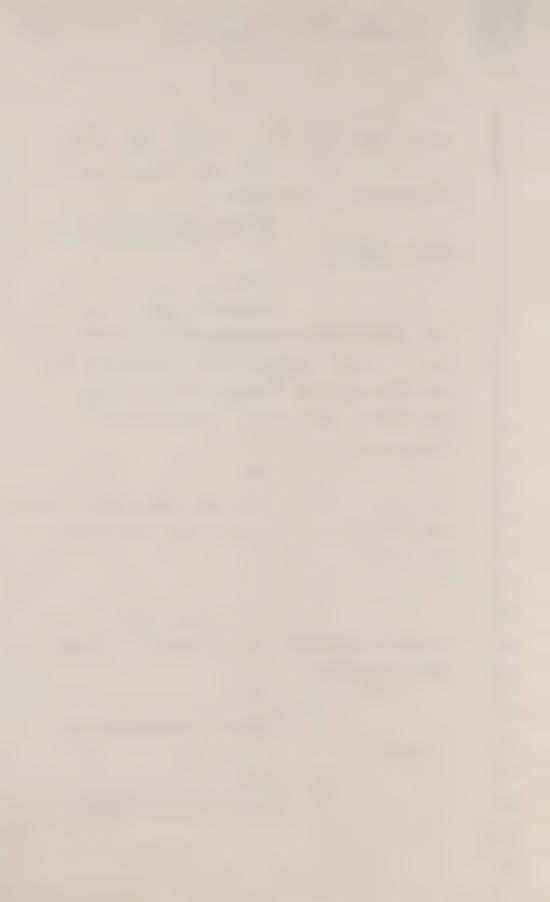
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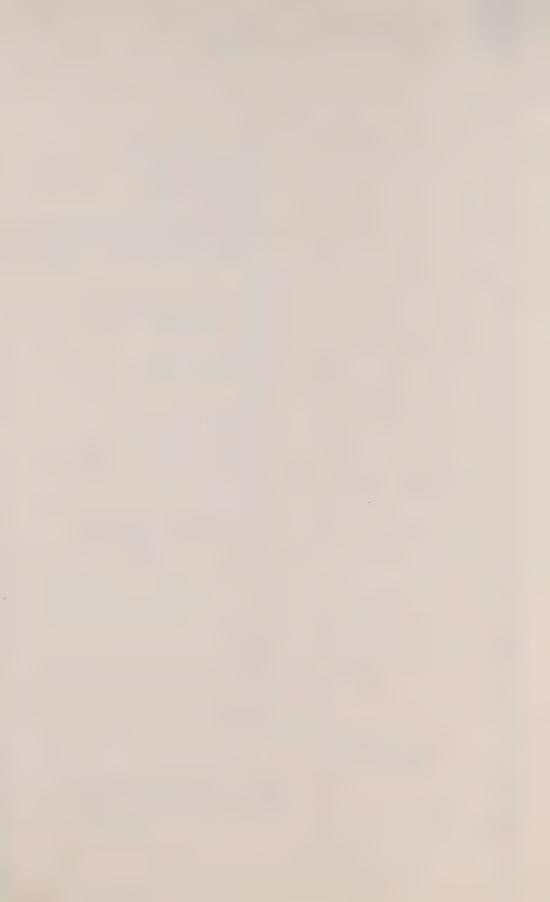
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4	AF M BE	24115-1	(Lamek)	
<u> </u>	J.4			
n	1			
	2	<u>(</u> .	"Rapidly going slow"?	
	3	·	"Rapid and slow".	
3	4	Contraction	"Rapid and slow"?	
	5	A.	It goes up and then slows down.	
1)	6).	You mean the rate was fluctuating?	
	7	. 3.	Yes.	
П		Ç.	Okay. You say "apex was faint".	
	8	A.	Yes.	
	9	j.	'On ausculation"?	
	10	À.	Yes.	
	11	Q.	The rate	
	12	A.	"The rate on the monitor shows	
	13	30% was some and then	went down to 2.	
	14	Q.	Down to 2?	
		А.	Yes, just go up and down.	
	15	Q.	Down to 2, you mean 2 or 200?	
1	16	Α.	2.	
	17	Q.	2?	
	18	Α.	Yes.	
	19	Q.	That is essentially stopped?	
-	20	Α.	It showed on the cardiac monitor.	
1	21	Q.	So you started to do cardio-	
		pulmonary massage?		
	22	Α.	No, I pressed the button.	

Q.

You pressed the button?





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	14	what i
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	16	with y
	17	with y
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	19	down",
	20	that w
	21	Mrs. So
	22	"rapid
	23	

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		A.	I	sat	down	and	read	d my	bool	Κ,
and glancing	at	the	baby	7 000	casio	nally	, e	very	now	and
th n										

- Were you sitting at the bedside?
- Yes, beside the cot.
- You were sitting beside her cot were reading your book and keeping an eye issales :
 - A. Yes.
- Q. Page 128 of the chart your note that at 0240:

"Baby observed to be slightly gasping and respiration rate rapidly ... "

s that?

"Rapid ... ".

O. Maybe you had better help me our writing.

A. I can't see very well in this.

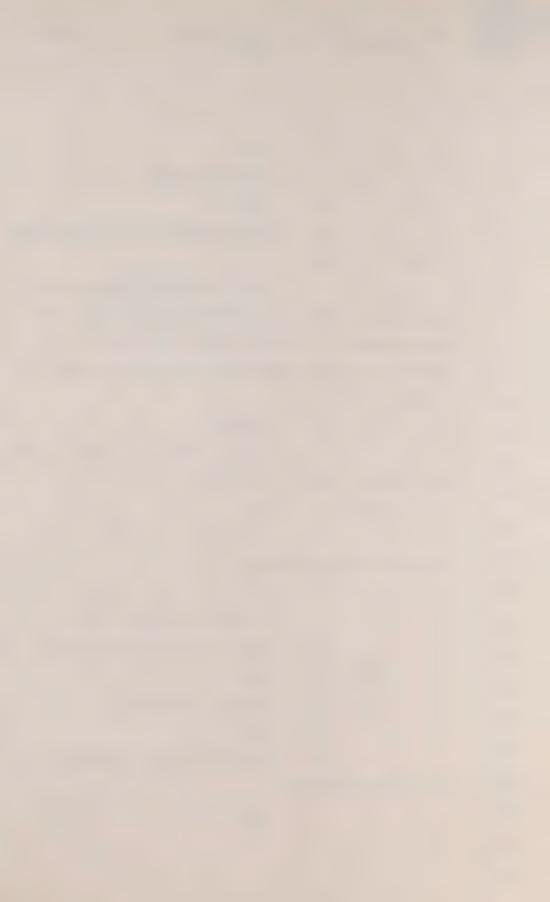
THE COMMISSIONER: "Rapidly going would that be? I have a lot of practice with riting and yours is much better than mine, cott.

MR. LAMEK: Q. It does look like ly going down".

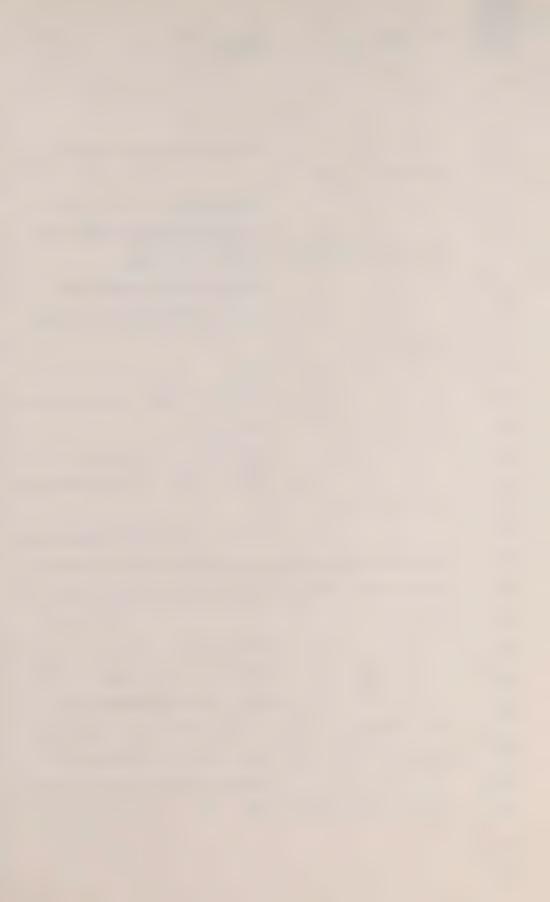
A. And "slow".



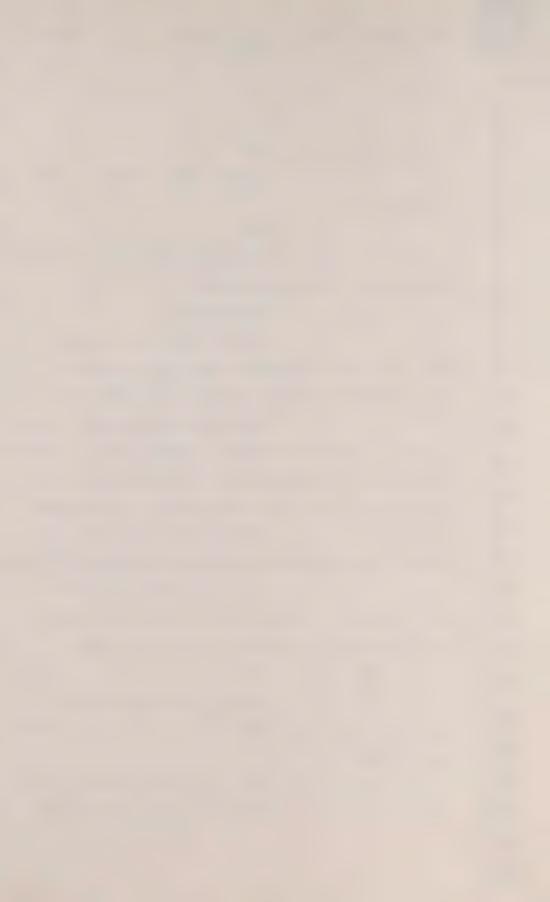
	_	
J.5		
2	A.	Ÿes.
3	Q.	Who started CPR?
4	Α.	Phyllis.
5	Q.	She came into the room when you
6	pressed the buzzer?	
	А.	Yes, she came in the room and
7	she started listening	to the baby's heart and I was
8	fixing oxygen, and the	en she said call Code 25 and I
9	rushed back to the doc	or and I saw Meredith coming in
10	and Bertha Bell.	
11	Q.	Meredith?
12	A	I saw Bertha Bell coming in just
13	as I was going out of	the door.
	Q.	Yes?
14	Α.	And I said to her get 25 and
15	one of the nurses phor	ned for 25.
16	Q.	One of the nurses called 25?
17	Α.	I don't know who it was.
18	Q.	And the arrest team arrived?
19	A.	Yes.
20	Q.	Shortly thereafter?
	Α.	Yes.
21	Q.	Did you remain throughout the
22	resuscitation effort?	
23	Α.	Yes.



J.6	1	
	2	Q. Do you recall what you were
	3	doing that night?
	4	A. I was drawing up the drugs.
	5	Q. Do you remember who else was
	6	there other than the resuscitation team?
	}	A. No, just Bertha, Mrs. Bell.
	7	Q. Did Mrs. Bell stay throughout
	8	the thing?
	9	A. Yes.
	10	Ω . Did Mrs. Trayner stay throughout?
	11	A. Yes.
	12	Q. Anybody else that you can recall?
	13	A. I don't - one of the supervisors
		but I don't
	14	Q. And as we know the resuscitation
	15	effort was not successful, the child died. Were you
	16	surprised when that child arrested and died when she
	17	did?
	18	A. Yes and no.
	19	Q. Could you explain that to us?
	20	A. Well, I was surprised but I
		didn't expect her to die that night, but considering
	21	her trouble, her condition, I wasn't surprised.
	22	Q. You are telling me that she was
	23	clearly a very sick child?
	24	

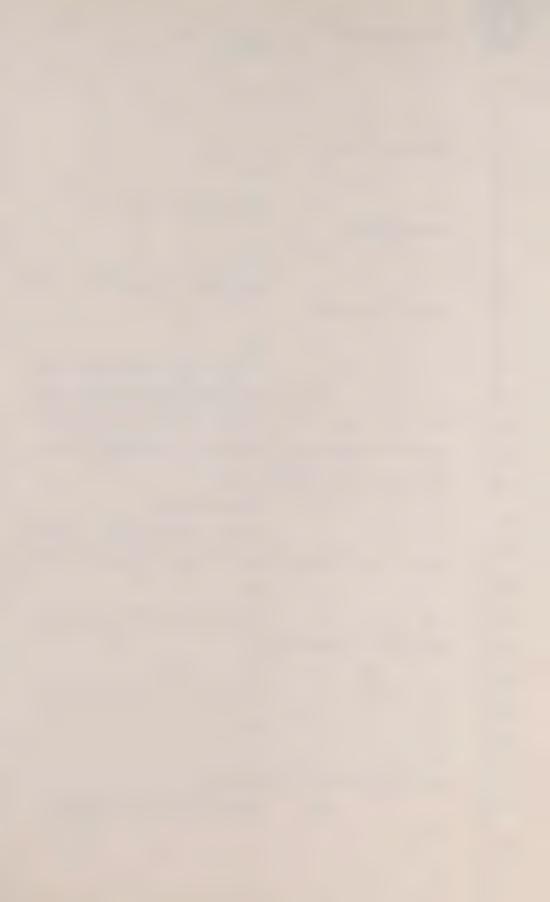


4 E h	(Lamek)
J.7	
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2	A. Yes.
3	Q. In that sense her death didn't
4	surprise you?
5	A. Yes.
6	Q. But on the other hand you hadn't
. 7	expected her to die that night?
8	A. That's right.
	Q. Did you wonder, Mrs. Scott,
9	what could have happened to send her into such a
10	sudden dramatic decline at 2:40 in the morning?
11	A. We did know that her dig. level
12	had been elevated in the past few days and Dr. Schaffer
13	was looking very serious and thoughtful, but I don't
14	know what he said to the other nurses in the nursing
15	station because I was busy in the room cleaning up
	the baby and getting her ready for the parents to come.
16	Q. Let us take that a bit at a
17	time if we can. You say you knew that her digoxin
18	level had been elevated for the past few days?
19	A. Yes.
20	Q. Indeed it had been elevated
21	since January the 7th when she had a very high digoxin
22	level indeed?
23	A. Well, I couldn't remember that.
	Q. Indeed she had had an earlier
24	





J.8 1	
2	respiratory arrest had she not?
3	
4	Q. From which she had been
5	resuscitated?
6	A. Yes.
	Q. And digoxin had been held since
7	the 7th of January?
8	A. Yes.
9	Q. You can take my word for that.
10	Was it also your understanding that
11	since the high level on the 7th of January subsequent
12	assays had shown that the digoxin level was coming
13	down, did you understand that?
14	A. I don't recall.
	Q. You don't recall that. Then you
15	say Dr. Schaffer was looking rather thoughtful about it
16	A. Yes.
17	Q. But you don't know what he may
18	have said to anyone else?
19	A. No.
20	Q. Did he say anything to you?
21	A. No.
22	Q. Did you ask him what he thought
23	might have caused this death?
	A. Immediately after the death?
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TORONTO, ONTARIO

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Q.	Yes.
Α.	I didn't have the time to ask him.
Q.	I am sorry?
· A.	I was busy with the parents and
the parents came and	I couldn't ask him when the
parents were there.	
Q.	You say you knew the child had
a high digoxin level.	Did it occur to you to wonder
whether that high dig	oxin level had had something to
do with her death?	
À.	No.
Q.	What then was the relevance of
recalling that she had	d a high digoxin level?
A.	Probably I had thought of that
but I was not too sure	e.
Q.	Do you recall whether you did
think of that?	
A.	Not that night.
Q.	When did you think of that?
A.	I wasn't very sure but I didn't
know until the police	interviewed me and said that she
had a very high level.	

Q. Until the police interviewed

you then it did not occur to you that digoxin might

have had something to do with her death?





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4.	No.
10	NO.

Q. Even though you had recalled on the night that she died that she had a high digoxin level?

A. Yes.

Q. Did you on the night of January the 10th to 11th administer any digoxin to Baby Estrella?

A. No.

Q. Did you administer any drug other than aldactazide and ampicillin that night?

A. No.

Q. I take it you are satisfied you gave the correct doses of those two drugs?

A. Yes.

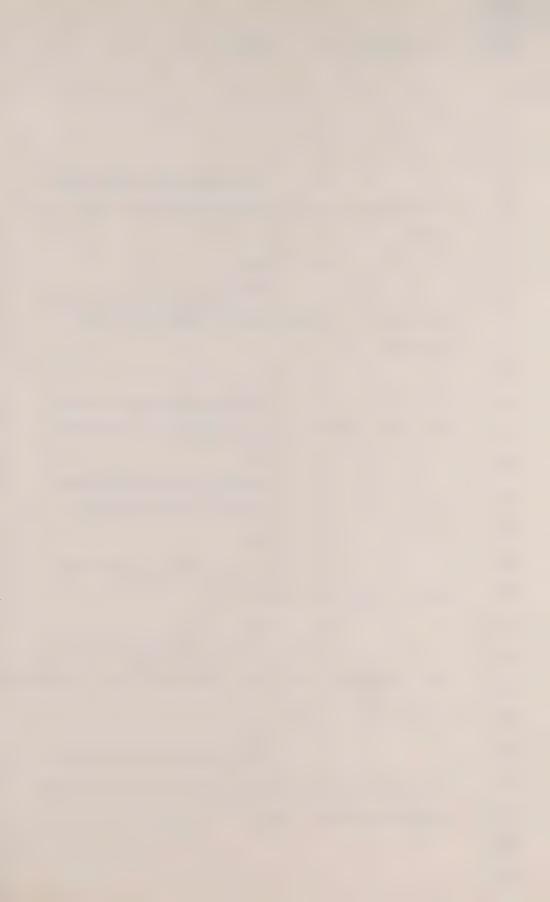
Q. And you didn't confuse any drugs or anything of that sort?

A. No.

Q. Did you see anyone else that night administer any drug to Estrella prior to the time she arrested?

A. No.

Q. While you were in that room did anybody other than yourself administer any drug of any kind to that baby?



WEMBER	
J.11 "	
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9	a high d
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17	prior to
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20	told me,
	relieved

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A. NO.

Q. Had it occurred while you were in the room is there any way you could have avoided seeing it?

- A. When I was in the room?
- O. Yes.
- A. No.
- Q. Did you subsequently learn that a high digoxin level had been recorded in a post mortem sample taken from that child?

A. I am not sure. The only time I recall knowing about that is when the police told me.

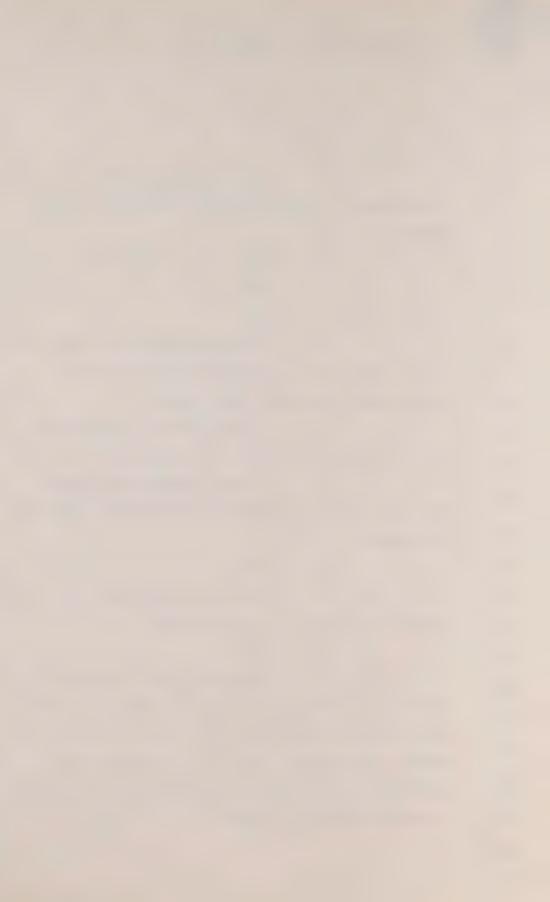
Q. It was then that you learned that in a post mortem sample a high digoxin level had been found?

A. Yes.

Q. You had no information about that prior to learning it from the police?

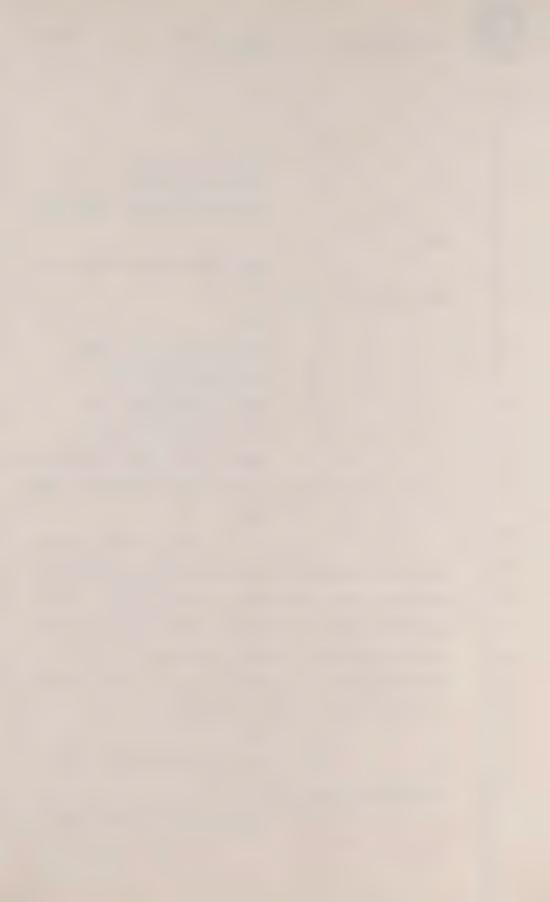
A. Yes.

Q. And other than, as you have told me, Dr. Tucker at 11:30; Mrs. Trayner when she relieved you for your break; and Janet Brownless who popped in a couple of times, do you recall seeing anyone else in Room 423 that night prior to the time of Janice Estrella's arrest?



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1.12		
2	A. T	he parents came.
3	Q. T	he parents came?
4	A. T	he mother and the grandmother
5	came.	
6	Q. W	ere you there throughout the
7	time they were there?	
		es.
8	Q W.	hat time did they come?
9	А. Т	hey came about 8:30.
10	Q. He	ow long did they stay?
11	A. O.	h, they left about ten.
12	Q. H.	ave we now named everybody tha
13	you can recall having se	een in that room that night?
14		es.
15	Q. J	ust to sum up those events
	and their chronology.	From approximately midnight
16	until the time you carr	ed the Code 25, do I have it
17		that after your return from
18	your coffee break you we	
19		re relieved by Mrs. Trayner
20	at about 1:30 for your	
21		es.
22		o you recall what you were
23	doing until 1:30?	was reading a book and
24	watching a film.	and a sound and



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Q Do you recall what the film was?

A. Yes.

Q. What was it?

A. "Sweet Charity".

Q. Was that on television?

A. Yes.

Q. Was there a television set in

Room 423?

A. Yes.

MR. LAMEK: Mr. Commissioner, I can tell you that Mr. Rosenberg has been good enough to provide me with a copy of TV Times, or Guide for that night and indeed "Sweet Charity" was playing that night. If we need to mark it it is available but I don't think we need it.

THE COMMISSIONER: No, no. Thank you.

MR. LAMEK: Q. So when you returned from coffee you were with the child constantly until you got off for your lunch break at 1:30 or very shortly thereafter?

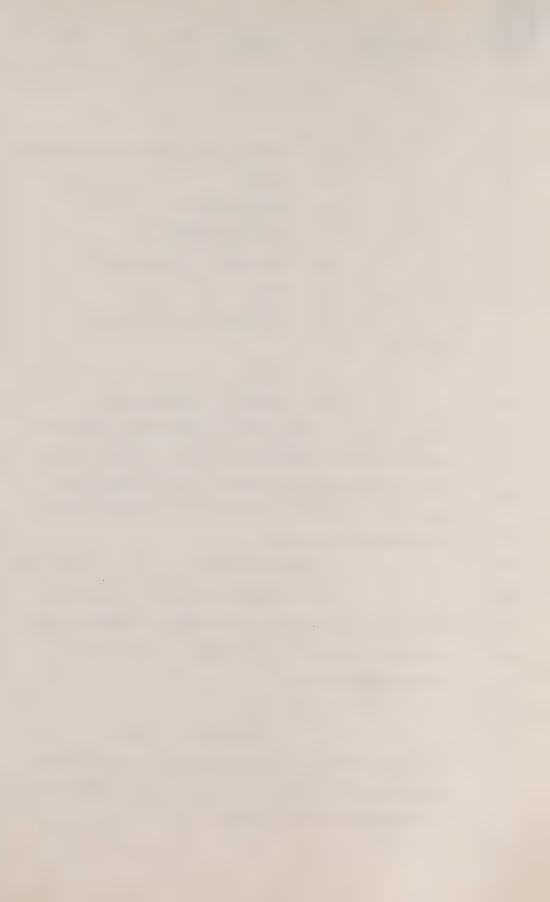
Yes.

Q. You are out of Room 423 from

1:30 until about 2 o'clock, during that time to the

best of your knowledge Mrs. Trayner, the team leader,

was looking after the child?



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Α. Yes.

0. She apparently left the room at about 2 o'clock and came back to the nursing station.

Yes.

Q. And you within a matter of minutes returned to the room?

Yes.

THE COMMISSIONER: That coffee that you poured did you take that into the room with you? THE WITNESS: Yes.

MR. LAMEK: Q. When you got back to the room the child appeared to be in the same condition as she had been in the first part of the shift?

A. Yes.

And she remained so until about 40 minutes later when she suddenly manifested pretty severe problems?

> Yes. A.

Her heart rate zoomed up and 0. the dropped to almost nothing?

> A. Yes.

And her respiratory rate that had been fast for a couple of days was now fluctuating?



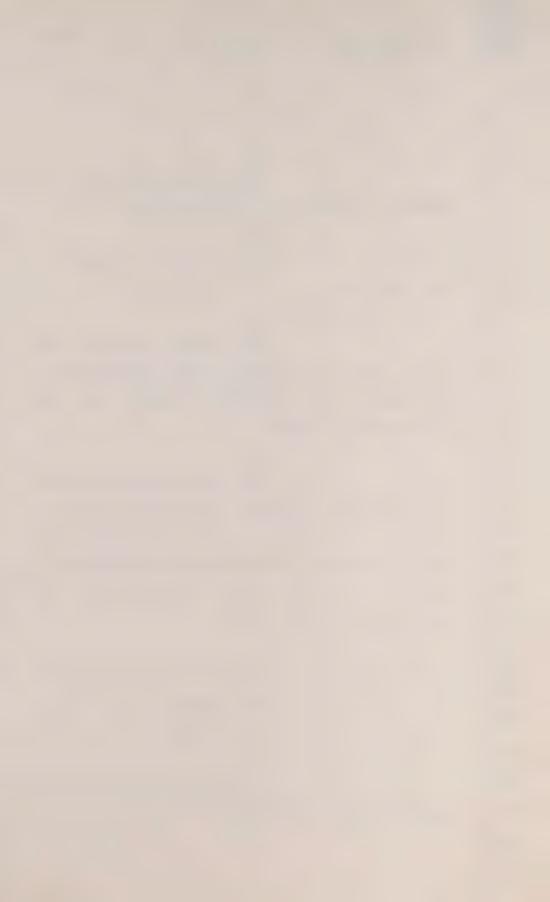
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WEMBE O		(Same)
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2	A.	Yes.
3	Q.	And that progressed pretty
4	rapidly to cardiac	arrest and then death?
5	A.	Yes.
6	Q.	Have I correctly summarized
7	that time span?	
	A.	Yes.
8	Q.	Did it occur to you Mrs. Scott
9	looking back at the	e events of that night that in
10	some measure they p	paralleled the events of the night
11	of Brian Gage's dea	ath?
12	A.	Yes.
13	Q.	That is to say you had gone to
	lunch leaving an ap	pparently stable child, you got
14	back, the child see	emed unchanged, and within an hour
15	the child suddenly	developed severe symptoms and
16	progressed rapidly	to cardiac arrest and death. Did
17	that parallel occu	r to you?
18	Α.	Yes.
19	Q.	When did it occur to you?
20	A.	After Estrella.
	Q.	After Estrella?
21	Α.	Yes.
22	0.	. Did you ascribe it to anything

la. la? . Did you ascribe it to anything other than sheer coincidence?





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A. No.

Q. Did you regard it as sheer coincidence too that on each occasion you had gone off for lunch and the child was being cared for by Mrs. Trayner?

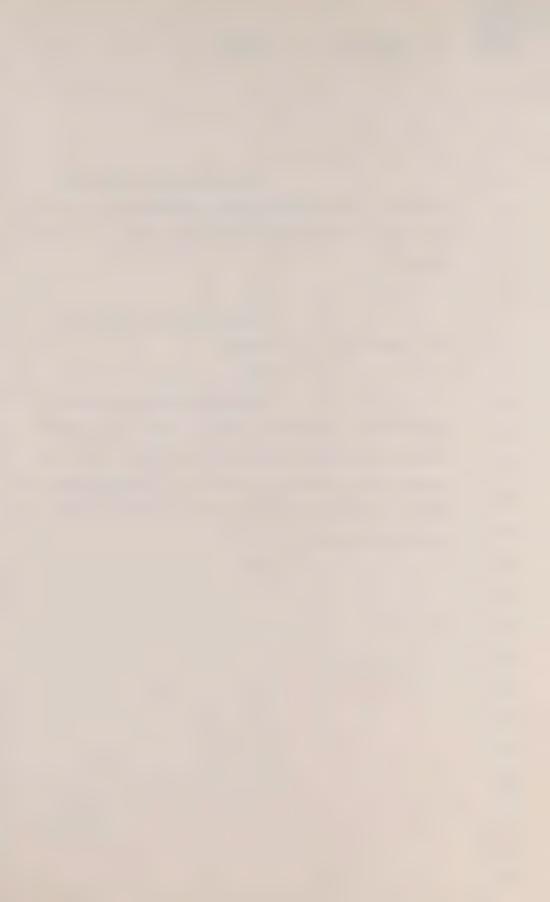
A. No.

Q. That was also to your mind at that time sheer coincidence?

A. Yes.

Q. You said when you mentioned Estrella as a particular example that your general impression was that you would go off for lunch, or another break, leaving a child and come back from the break and shortly afterwards the child would get sick and go into arrest?

A. Yes.





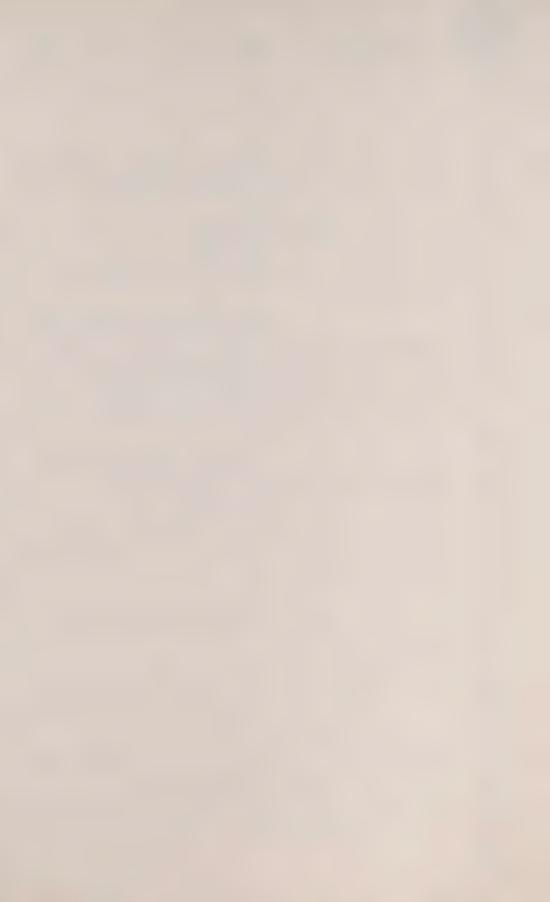
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O. Had that impression already
formed in your mind by the time of Estrella's death?
A. Yes.
O. All right.
A. There were other kids not looked
after by me.
Q. There were other children not
looked after by you. It was your general observation
was it, that children tended to die shortly after
nurse in charge of them had gone for break?
A. Yes.
Q. Was that a matter that other
nurses on the floor were commenting upon?
A. I don't know.
Q. Did you disclose to anyone else
your observation?
A. No.
Q. You didn't discuss it with
anybody?
A. No.
Q. I want to take things out of
sequence I see it is a quarter to 1, Mr.
Commissioner. I was about to move to another case.

THE COMMISSIONER: Yes.

MR. LAMEK: Is it the proper time to

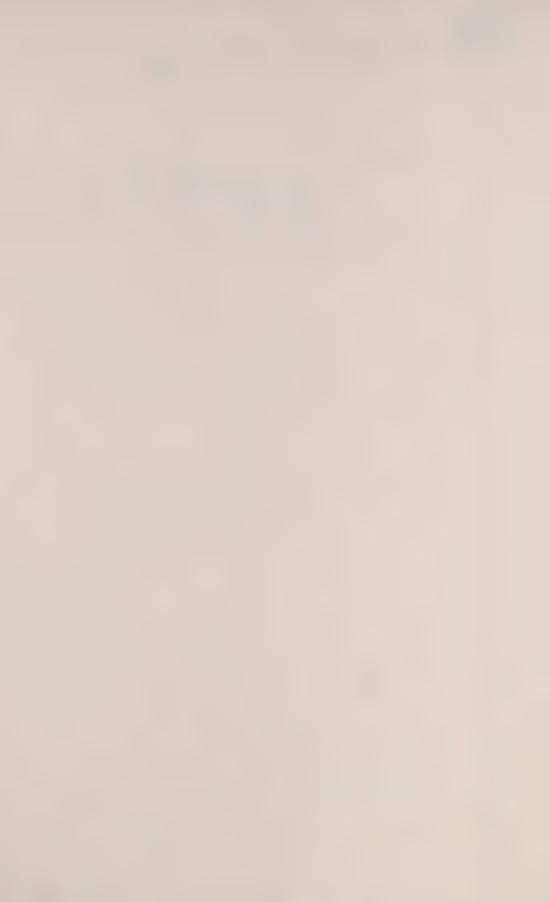


break?

THE COMMISSIONER: Yes. Until 2:15.

MR. LAMEK: Till 2:15. Thank you, sir.

--Luncheon recess.



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---On resuming at 2:15 p.m.

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THE COMMISSIONER: Yes, Mr. Lamek.

MR. LAMEK: Thank you, sir.

Q. Mrs. Scott, we were talking about Janice Estrella just before we broke for lunch.

I would like now to jump ahead in time if I may to the only other case of those in which we are interested where as I understand it on the night the child died you were required to be with the child constantly, and that is the case of Sharlon Gardner.

A. Yes.

Q. She died in the early hours of March 18, 1981.

A. Yes.

MR. LAMEK: I am going to ask the Registrar if he would put the chart in front of you, please.

THE COMMISSIONER: Sorry, what was the preface to that statement? You said the only other?

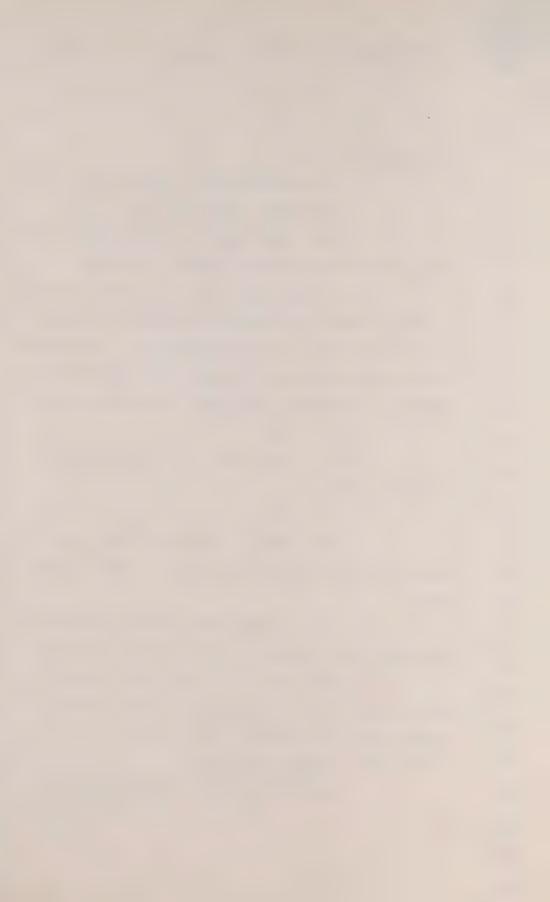
MR. LAMEK: The only other child of those in whom we are interested where Mrs. Scott on the night of the child's death was providing, in this case, shared nursing care.

THE COMMISSIONER: Shared? Oh,I see,

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yes.



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MR. LAMEK: Q. Now we are looking at the night, Mrs. Scott, of March 17 to 18. You were on duty that night I believe.

A. Yes.

THE COMMISSIONER: I'm sorry. It is these little asides that get to me. What about Warner? Wasn't --

MR. LAMEK: Not on constant or shared care, sir. Was assigned to the patient but not on a continuous basis.

THE COMMISSIONER: Oh, I see. All right. Very well.

MR. LAMEK: Having just moved from Estrella where there was constant care provided by Mrs. Scott --

THE COMMISSIONER: Yes.

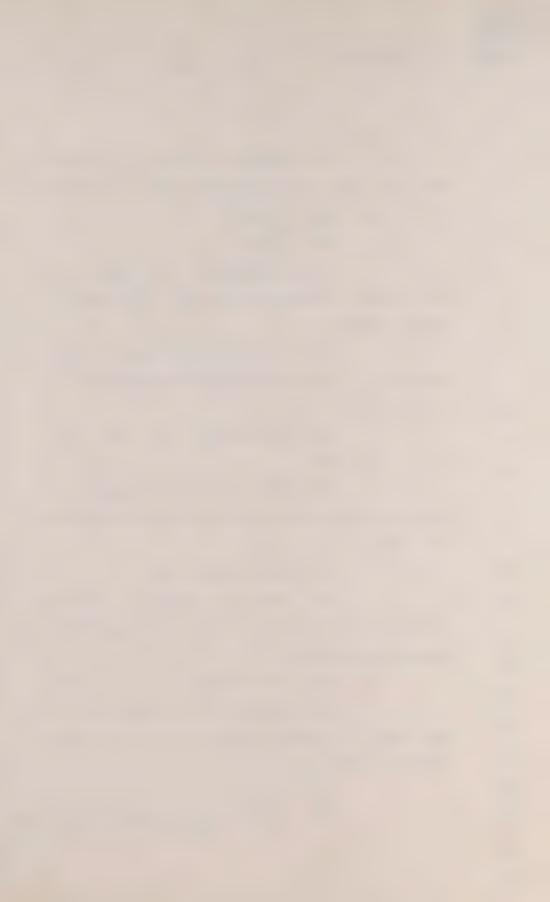
MR. LAMEK: -- I thought I would move to Gardner where there was also an enhanced degree of nursing care provided.

THE COMMISSIONER: Yes. All right.

MR. LAMEK: You were assigned, I think, Mrs. Scott, to provide shared nursing care to Baby Gardner in Room 418?

A. Yes.

And to another child who was also



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in that same room?

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Α. Yes.

So you had two children in 418 0. and they were your only two patients that night?

> Α. Yes.

0. Now we know from the assignment book (and that, Mr. Commissioner, is Exhibit 32A at tab 13). Perhaps we can look at this together. We can both look at my copy, Mrs. Scott.

We have Tuesday, March 17th, and here we are at the long night. Mrs. Trayner was in charge and had no specific patient assignments. You as we have said had two patients in 418 and were delivering shared nursing care to them and you were the only two RN's on that night, were you not?

> Α. Yes.

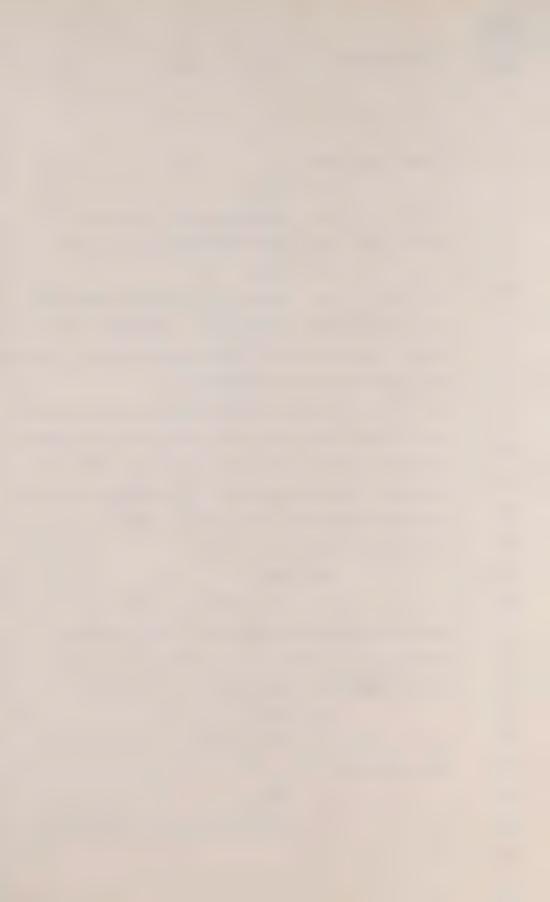
On that ward. There were two RNA's. Miss Brownless was on duty and had seven patients, four in Room 425 and three more in 418. Mrs. Christie was on and she had six patients.

> Α. Yes.

Four in 421 and one in 423 and 0. one in Room 426.

> Α. Yes.

0. So you were doing shared care



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to two; Miss Brownless was looking after seven patients; Mrs. Christie was looking after six and Mrs. Trayner being in charge.

Now Miss Brownless as we have said had three patients in Room 418 where your two patients were. Do you recall seeing Miss Brownless in 418 in the course of the night?

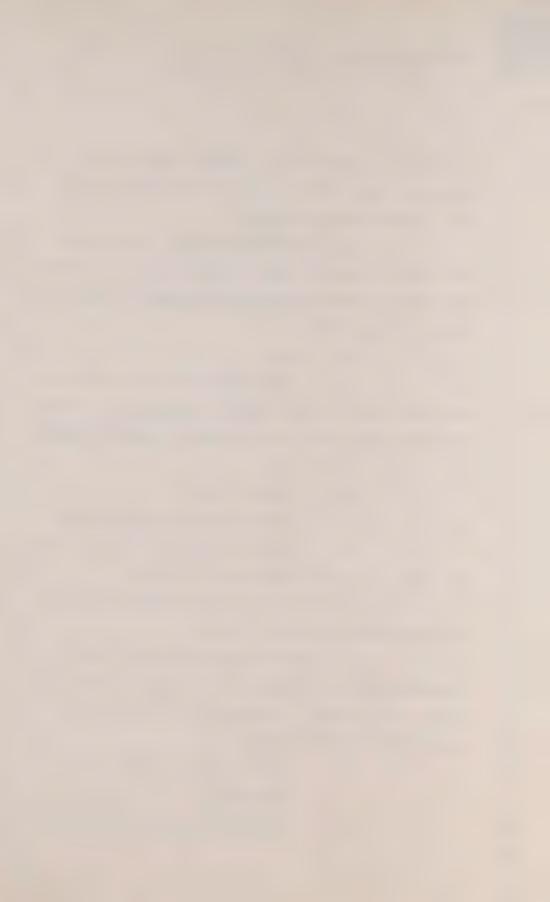
- Α. Yes.
- 0. Other than her do you recall seeing anyone else, nurse, doctor or anyone else in Room 418 that night prior to the arrest of Charlon Gardner?
 - Α. Yes.
 - Who was that? 0.
 - Phyllis Trayner and the doctor.
 - Phyllis Trayner and the doctor? 0.

All right. Tell me first about the doctor.

If we look at the chart will that help us? Page 57 is your nursing note, Mrs. Scott.

On page 56 there is a note by Dr. Kobayashi. That appears to be the 18th of March at 2:30 in the morning. Is that the reference to the doctor that you were making?

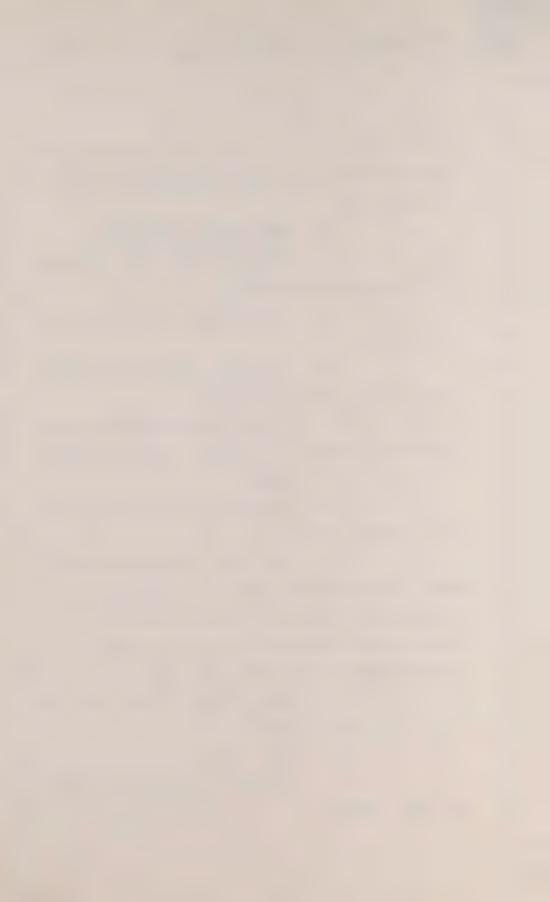
- No. He came in earlier.
- I'm sorry? 0.
- He came in earlier. Α.



O. All right. You are going to have to help me with that. That is before the arrest; you understand that.

- A. Yes, before the arrest.
- Q. Well, the note that I referred you to was before the arrest.
- A. No, not that. It was earlier, about 10, 11.
- Q. All right. He does not appear to have made a note in that case.
- A. He just came in and had a look at the baby and we told him about the apneic spells.
 - Q. Right.
- A. And he was on prostaglandin and so he reduced the rate.
- Q. Isn't that the note on page 56 to which I referred you a moment ago which appears to be Dr. Kobayashi reducing the rate of the I.V. flow?

 Three cc.'s an hour down to 2-1/2 cc.'s, down to 2 cc.'s an hour. Isn't that the note?
 - A. Page 56? No, it is not this one.
 - Q. Okay.
 - A. No.
- Q. Do you recall which doctor that was, Mrs. Scott?



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Scott dr. ex. (Lamek)

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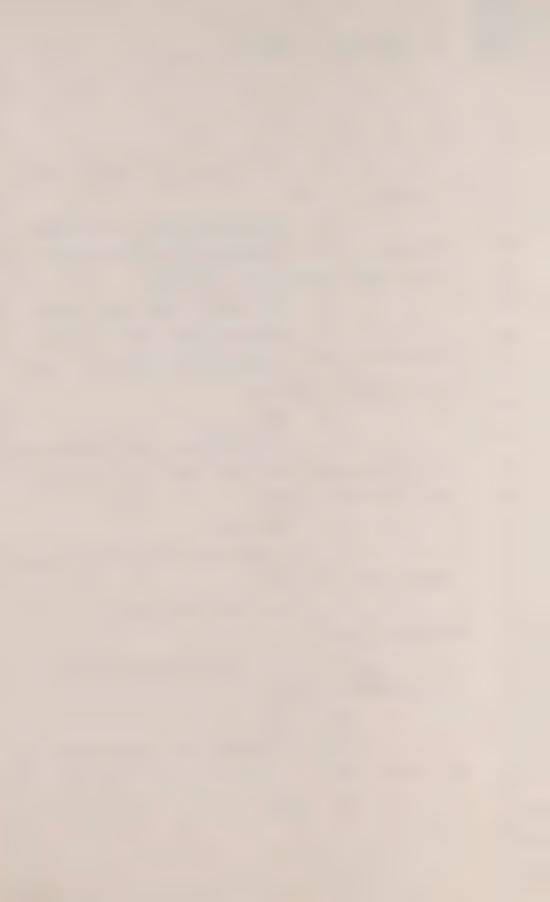
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- 0. Perhaps the note on the bottom of page 55 -- it is a signature that is not particularly easy to read. It may be Dr. Kobayashi.
 - No, I don't recall this doctor. Α.
- 0. That certainly seems to reflect a reduction of the prostaglandin flow down to 2 centimeters an hour, doesn't it?
 - Α. Yes.
- And that's the 17th of March which 0. was the beginning of the shift. What does that look like, 2030 hours? 8:30?
 - A . Yes, 8:30.
- Is that about the time you recall a doctor having been in?
- A. That wasn't Dr. Kobayashi. came before 2:30 as well.
- Do you recognize the signature at the bottom of page 55?
 - A. No.
- It appears to be a physician's note, does it not?
 - Α. Yes.



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THE COMMISSIONER: I'm sorry, you say you do recognize the signature?

THE WITNESS: No.

THE COMMISSIONER: Oh, you don't?

MR. LAMEK: You don't recognize the signature on the bottom of page 55 but it does appear to be a physician's note, does it not?

A. Yes.

Q. And appears to be referring to the reduction of prostaglandin flow rate?

A. They reduced it during the day shift as well.

Q. Okay. As far as the night shift is concerned, does that appear to be the note of the earlier physician visit that you made reference to a moment ago?

A. Not that physician. I remember Dr. Kobayashi.

Q. You remember Dr. Kobayashi --

A. Yes.

Q. -- being in earlier than 2:30

in the morning?

A. Yes.

Q. You remember two doctors being in earlier than 2:30 in the morning?



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Α.	No.	Just	Dr.	Kobayashi.
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Q. I suppose that could be a hurried Dr. Kobayashi signature on the bottom of page 55, could it not?

A. No.

THE COMMISSIONER: You say it wasn't Dr. Kobayashi. Is that right, Mrs. Scott? It wasn't Dr. Kobayashi --

A. It doesn't look like it.

THE COMMISSIONER: No, no, but the doctor that came in, the doctor you saw in the room.

THE WITNESS: Yes.

THE COMMISSIONER: That night, was not Dr. Kobayashi?

THE WITNESS: It was Dr. Kobayashi.

THE COMMISSIONER: It was Dr. Kobayashi?

I'm sorry. There was no other doctor besides Dr.

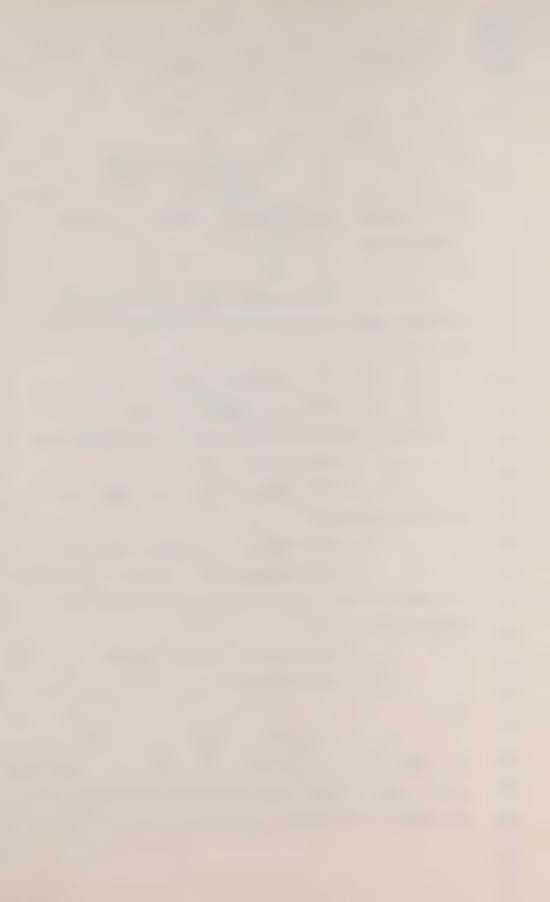
Kobayashi who came in; am I right?

THE WITNESS: I don't recall.

THE COMMISSIONER: All right. Thank

you.

MR. LAMEK: Q. Well, if we look at page 101, Mrs. Scott, that may help us. There is a physician's order there at 1930 hours which would be right at the beginning of your shift, would it not, on the 17th of



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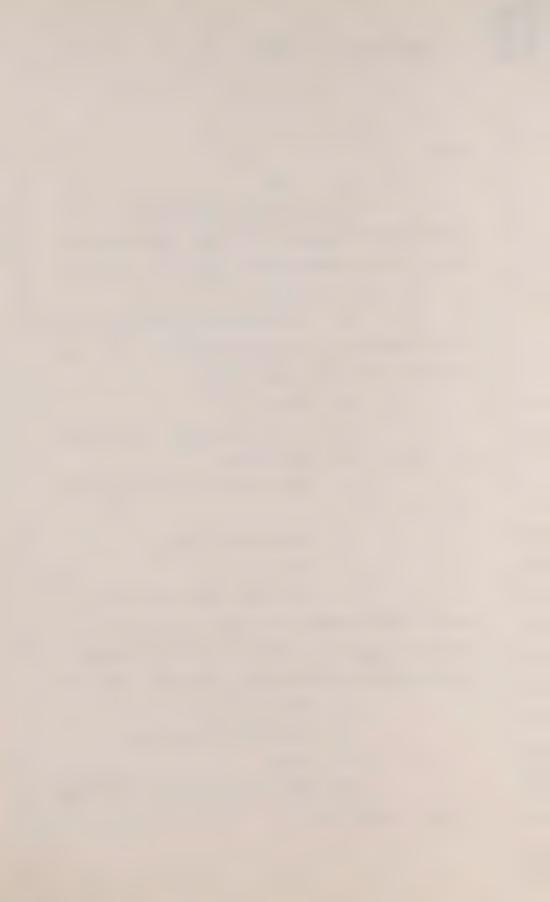
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TORONTO ONTARIO

- A. Yes.
- 0. It talks about reducing the prostaglandin infusion to 2.0 cubic centimeters an hour. And that seems to be signed by Dr. Kobayashi.
 - Α. Yes.
- Do you recall his having come in at the beginning of the shift and giving that order to reduce the prostaglandin flow?
 - Α. Yes.
- Is that the visit that you were 0. referring to a few minutes ago?
- Not -- he came in after that as Α. well.
 - And before 2:30? 0.
 - Α. Yes.
- You don't think that may have been the note on page 55 at apparently 8:30 in the evening? Forget about the signature for a moment. Is 8:30 about the time that Dr. Kobayashi came in?
 - A . Between that and 9:00.
 - Between 8:30 and 9:00? 0.
 - Yes.

THE COMMISSIONER: But you also said he came in about 10:00.



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THE WITNESS: Yes, he came in a couple of times but not necessarily he copy notes every time he came in.

MR. LAMEK: O. Okay. Well, can we get at it this way --

> MR. ROSENBERG: Can I just help you? MR. LAMEK: Sure. I would be glad

MR. ROSENBERG: If you look at page 52 of the chart you will see another way Dr. Kobayashi signs his signature.

MR. LAMEK: Yes.

MR. ROSENBERG: That looks close to what is on page 55.

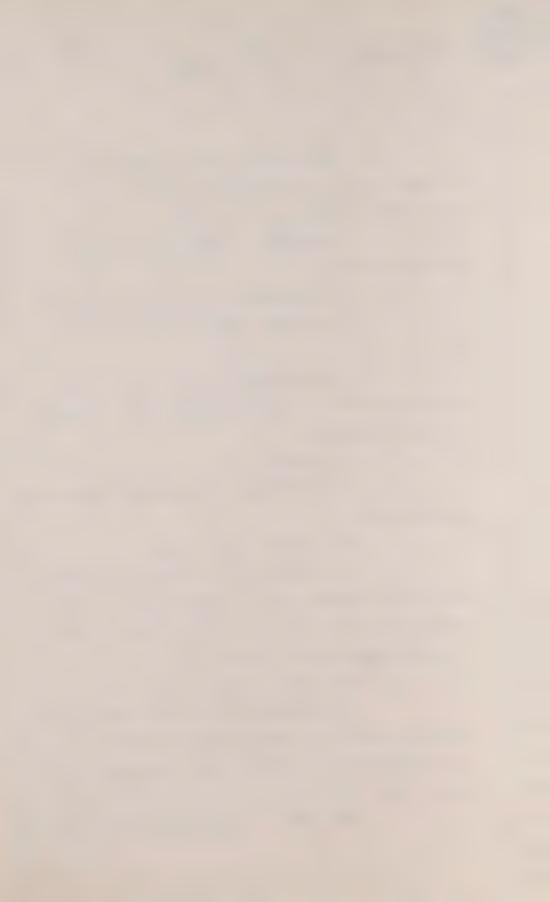
MR. LAMEK: Yes. it does.

MR. ROLAND: To further the detective work on the signature, if you look at the J on page 55 and the one on 101 it is much the same. I think it looks like it is Dr. Kobayashi.

MR. LAMEK: I think it is too.

THE COMMISSIONER: I don't know how it could be, though, that sometimes he is fond of the K at the beginning of his name and sometimes it is hardly even --

MR. LAMEK: I think it is a K at the



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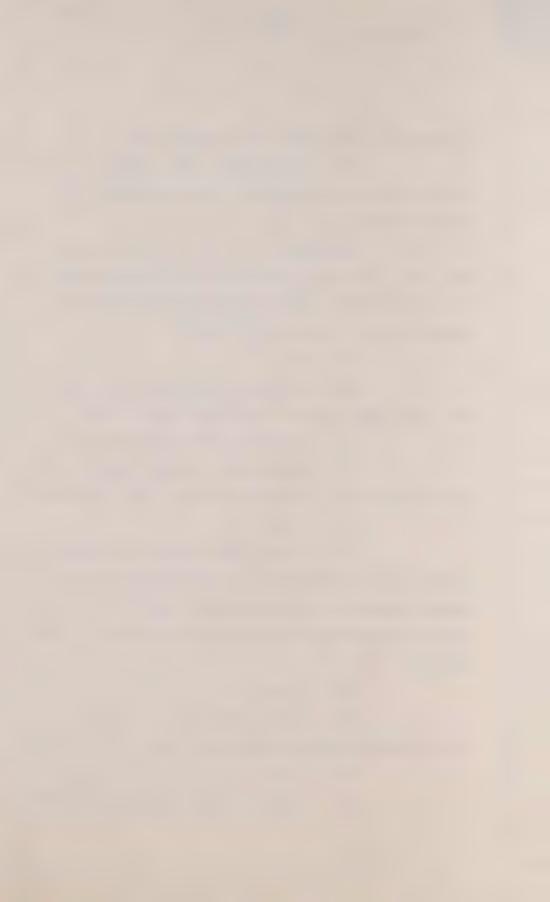
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24 25 beginning of that name. A J and then a K.

THE COMMISSIONER: Yes. However, we will accept them as Dr. Kobavashi's until somebody shows to the contrary.

MR. LAMEK: O. Can I cover it this way, Mrs. Scott: do you recall any physician other than Dr. Kobayashi being in the room with Charlon Gardner prior to that child's arrest?

- Α. No.
- And your recollection is that he 0. in, what, two or three times did you say?
 - At least twice before the arrest.
- All right. We know that he wrote 0 an order at 7:30, and that is at page 101 of the chart
 - Yes. Α.
- And if the signature on page 55 0. indeed be Dr. Kobayashi's, he was apparently in the room at about 8:30 in the evening. And then on page 56 he was apparently in the room at about 2:30 in the morning.
 - Yes. Α.
- Were you present on each of 0. those occasions when Dr. Kobayashi came into the room?
 - Yes. Α.
 - And you didn't leave the child 0.



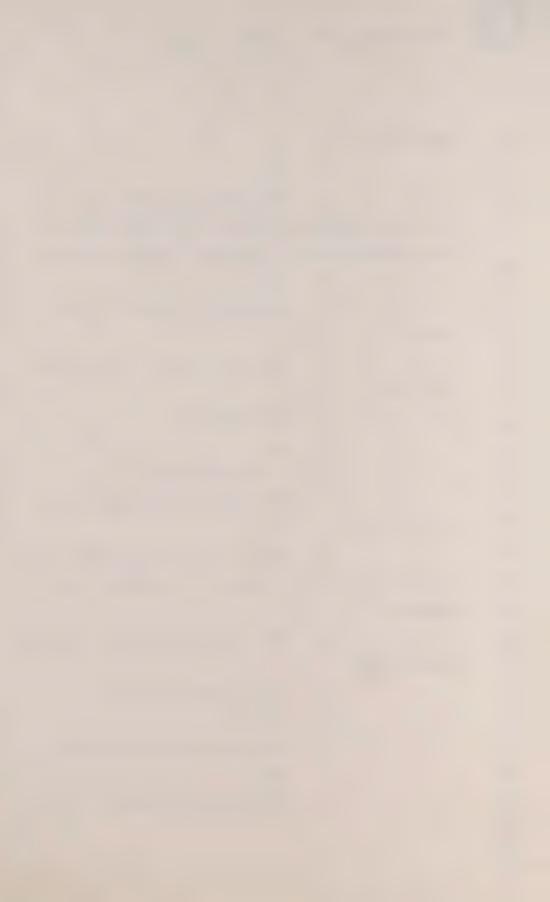


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Scott dr. ex. (Lamek)

1 2 with him at all? No. 3 O. And the other person you said 4 you recall seeing in Room 418 that night other than 5 Miss Brownless and Dr. Kobayashi was Mrs. Trayner? 6 Yes. Α. 7 When did you see her in the 8 room? She was there when the doctors Α. 9 were there. 10 She came with --0. 11 Α. Yes. 12 -- Dr. Kobayashi? 0. 13 When she saw the doctor came in A . 14 she came in, too. O. Was she there on any other 15 occasion than on the occasion of the doctors being 16 present? 17 Well, she usually comes in every Α. 18 now and then. 19 In the normal course? 0. 20 Yes. A. To see how things are going? 21 0. 22 Yes. Α. How the patients are? 0. 23 24



Scott dr. ex. (Lamek)

A. Yes.

O. Do you have any particular recollection of her coming in that way on that night?

A. No.

O. Do you recall how frequently Miss Brownless was in the room that night? She had patients in room 418 and patients elsewhere.

A. She was there for the signs and the feeding.

Q. Now when you are on shared nursing care do you need to be relieved for breaks?

A. Yes.

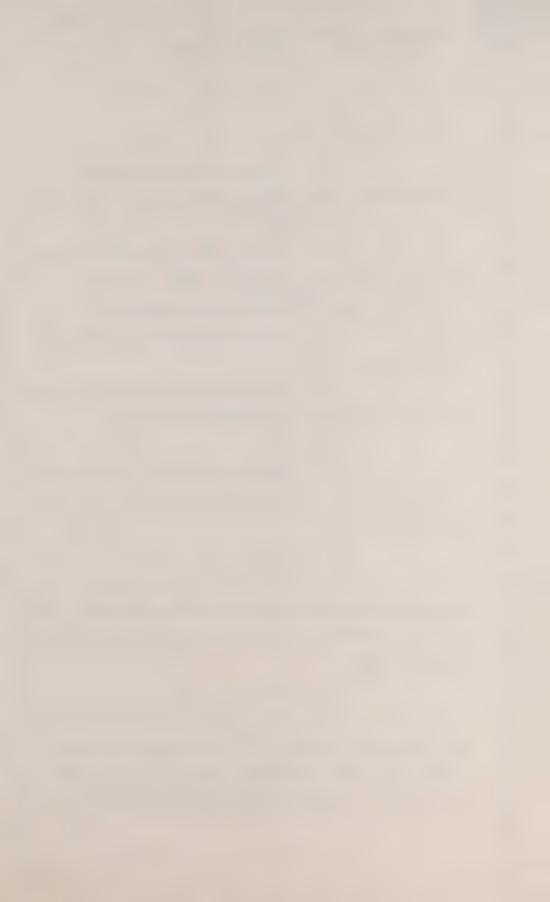
Q. And as you told us this morning with respect to constant care, is that relief normally given by an RN?

A. Yes.

Q. Do you recall any occasion when you were on shared nursing care for two children when you were relieved for a break by anyone other than an RN?

A. No.

O. Now, looking at your nursing note for the night of March 17 to 18 on page 57 of the chart, and taking assistance from that if you need to, can you tell us, please, what was the child's



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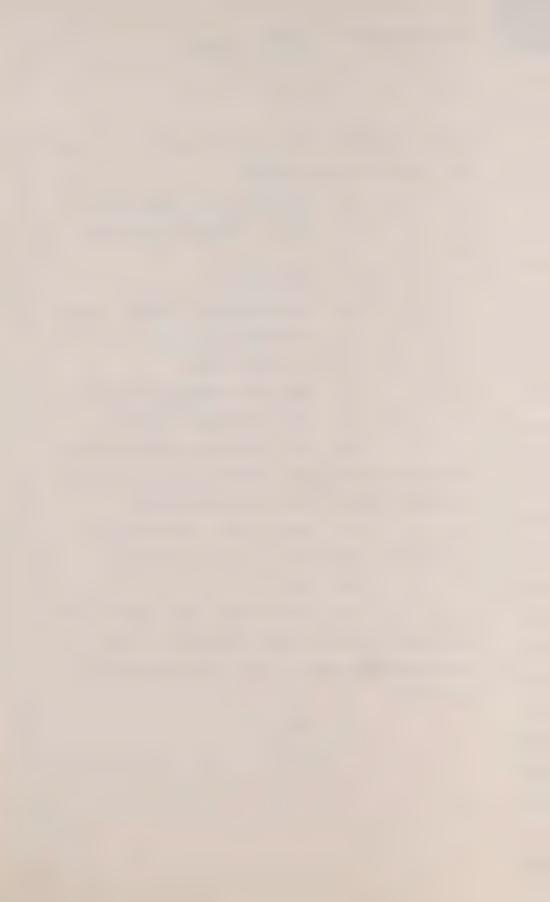
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condition and course from the beginning of the shift until the time of her arrest?

- A. Well, he had a temperature --
- Q. He -- I thought Charlon was a
- A. Oh, sorry.
- Q. I don't know. I think it was --
- A. I think it was a she.
- Q. I think it was.
- A. She had a temperature of 38.3.
- O. Is that slightly elevated?
- A. Yes. And her respirations were rather high but regular. And her apex was 178 and 162 regular, but it was very stable for her.
- Q. And was that the generally applicable picture until 3:30 in the morning?
 - A. Yes.
- Q. Now the very last sheet of the chart as it is bound there, Mrs. Scott, is the flow sheet, and seems to record vital signs hourly, does it not?
 - A. Yes.





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Q. And the picture as you have described it seems to be reasonably constant until 3 o'clock in the morning at least from the beginning of the shift; is that fair?

A. Yes.

Q. Okay. So, again I take it not a well child and in need of some enhanced level of nursing care but she seemed to be stable in the sense that her condition was not fluctuating or changing; is that fair?

A. That's right.

Q. Okay. Until 3 o'clock in the morning did you have any cause for concern that that child might not make it through the night?

A. No.

Q. When did you take your breaks that night?

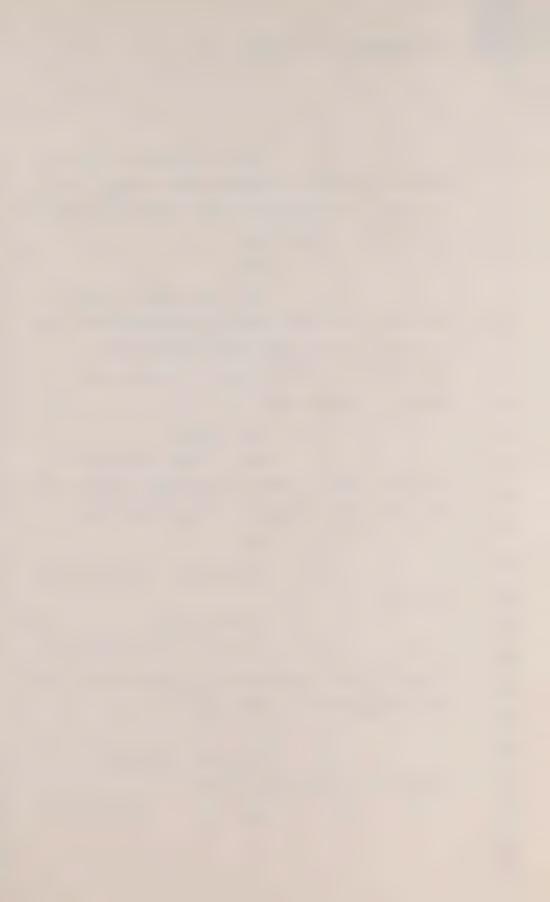
A. I don't recall.

Q. Do you have any recollection of taking them at anything other than the usual time frame that you told us about earlier?

A. No.

Q. 10 or 10:30 for coffee and 1:30ish in the morning for lunch?

A. Yes.



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0. All right. Who relieved you for your breaks that night?

I don't recall but probably Phyllis Trayner.

Ο, Had you been relieved for your breaks by an RNA that night would that have been unusual?

> Α. Yes.

0. Would it have been sufficiently unusual for you to have recalled it?

> No. A.

0. Not so unusual that you wouldn't remember?

> Α. I mean yes.

0. Because you told us earlier that you had never been relieved when you were on this kind of care by anyone other than RNs?

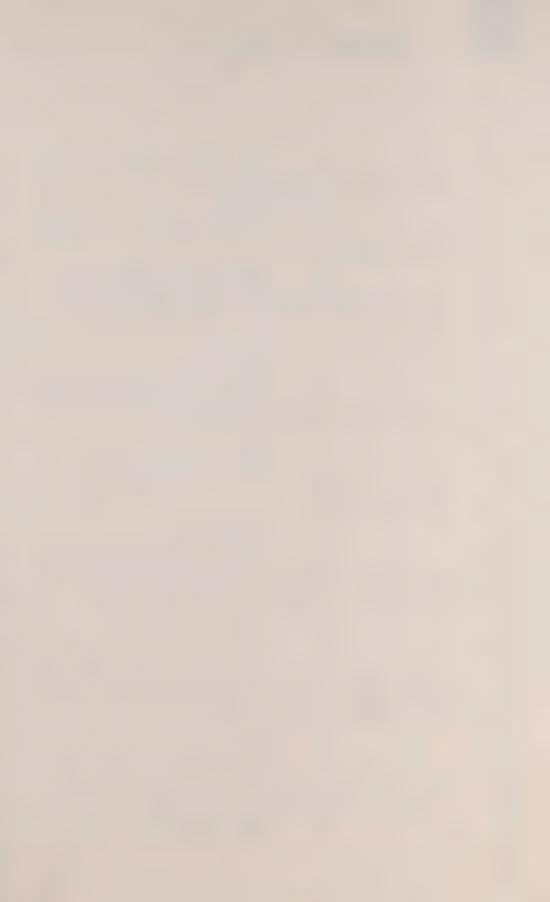
> Yes. Α.

And we know that on your side of the ward at least that night you and Mrs. Trayner were the only two RNs on duty?

> Yes. Α.

Q. But you do not recall who it was that relieved you for your break?

> A. That's right.



Scott, dr.ex. (Lamek)

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Q. Now, Baby Gardner's condition I take it when you left for your break was as you have described it, she was not well, she's got a slightly elevated temperature, she's got, what, a slightly elevated heart rate and all the rest of it, but she was stable?

A. Yes.

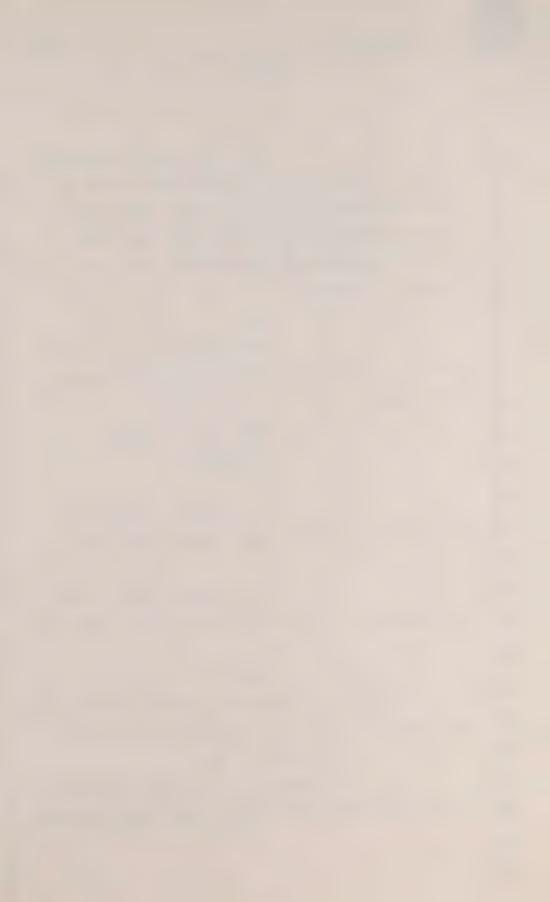
Q. Fair enough. Do you recall what her condition was when you returned from your lunch break?

- A. There was no change.
- Q. No change?
- A. No.
- Q. Do you recall whether there was anybody in the room when you left for lunch?
 - A. No.
- Q. Do you recall whether there was anybody in the room when you came back from lunch?
 - A. No.
 - Q. Okay.

THE COMMISSIONER: Do you recall going for lunch or do you recall coming back from lunch?

THE WITNESS: No.

MR. LAMEK: Q. Is there any reason to think that you didn't take a lunch break that night?



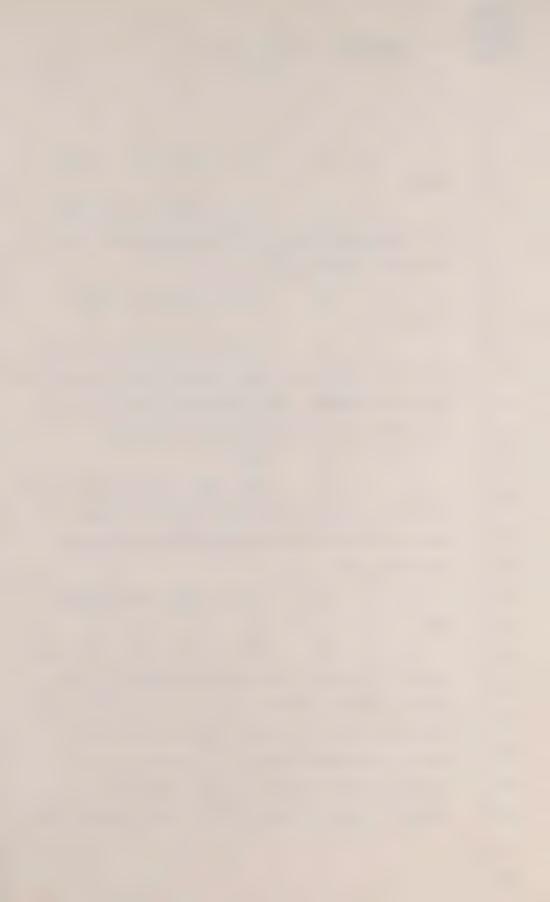
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Α.	No,	I	always	take	a	lunch

- Q. Okay. Certainly you would have remembered that if you had missed your lunch entirely, wouldn't you?
- A. I can't survive without eating.
- Q. I take it though, Mrs. Scott, that your relief for those breaks, whoever it was, and you can't remember, but your relief would have been there when you left and when you came back?
 - A. Yes.
- Q. All right. How long after your return did the baby get into trouble, how much before 3:30 did you get back from lunch is what I am asking you?
- A. About an hour, an hour and a half.
- Q. About an hour to an hour and a half. You have recorded what happened in your nursing note on page 57. You have recorded what the vital signs were, the apex and everything else, regular, until 0330 hours the rate went down to 122 and was very irregular and Dr. Kobayshi was called. I take it first of all a heart rate of 122





in an infant is not terribly slow but it was a good deal slower than this child's had been earlier?

A. Yes.

Q. And rather than having then a regular rate, which it had been throughout the shift, it is now very irregular, was it?

A. Yes.

Q. Is that what caused you the

concern?

A. Yes.

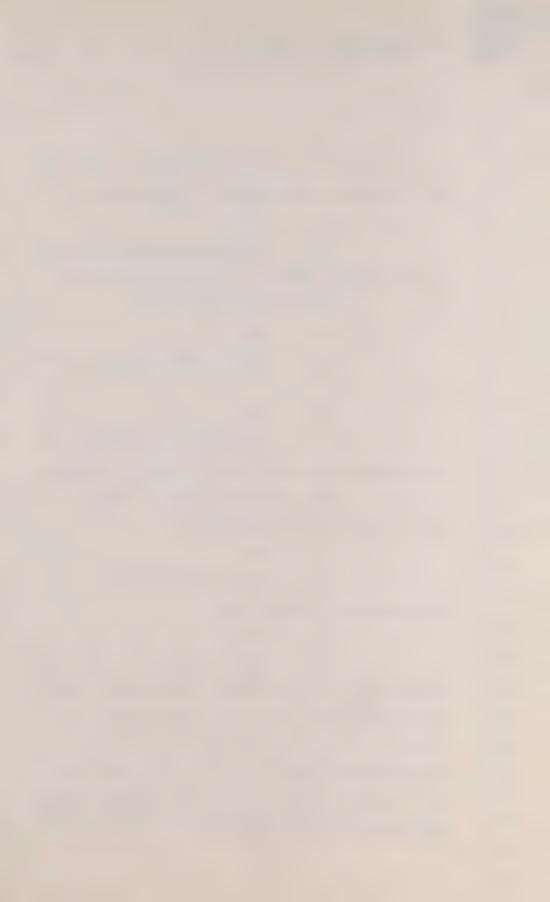
Q. So, your note recorded that Dr. Kobayshi was called. We know that Dr. Kobayshi had been in to see the baby at least a couple of times earlier during that shift?

A. Yes.

Q. And had adjusted the prostaglandin infusion rate?

A. Yes.

Q. Now, on page 60 there is what I believe to be Dr. Kobayshi's note of what happened when he was called at 3:30 in the morning. He records he was called to see the baby because of bradycardia and irregular heart rate. There had been a slowing of the heart and an irregularity had developed as you have told us?

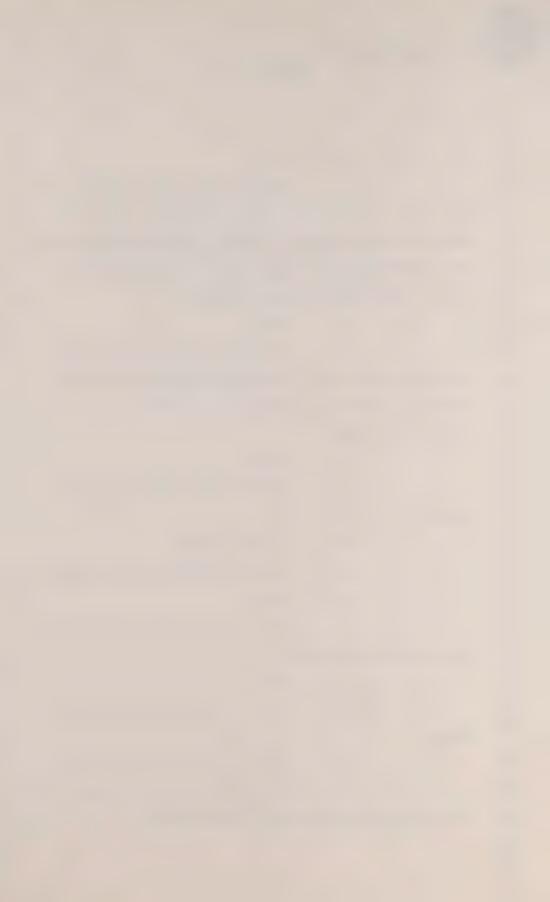


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2	A. Yes.
3	Q. And he says now the heart rate
4	was down to 102 per minute with ectopic junctional
5	beats, and then he says, "Went further bradycardic to
6	95 a minute and then to ventricular fibrillation".
7	Do you recall that having occurred?
	A. Yes.
8	Q. It says there was CPR given
9	for 45 minutes with intracardiac adrenelin without
10	success. I take it a Code 25 was called on this
11	child, Mrs. Scott?
12	A. Yes.
13	Q. Do you recall who called the
	Code?
14	A. I don't recall.
15	Q. And the arrest team arrived?
16	A. Yes.
17	Q. And were you there throughout
18	the resuscitation effort?
19	A. Yes.
20	Q. Do you recall what you were
	doing?
21	A. I was drawing up the drugs.
22	Q. You were drawing up drugs.

Once again the effort was unsuccessful.

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understand it.

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Page 56 there is an arrest note at the bottom of the page. The second paragraph of that note on page 56, Mrs. Scott, it says:

"Previous sinus rhythm progressed via junctional rhythm AV block to extreme bradycardia, gasping respirations".

Were those observations that you were able to make at the time?

A. What, at the time she took a turn for the worst?

Q. Yes.

A. Yes.

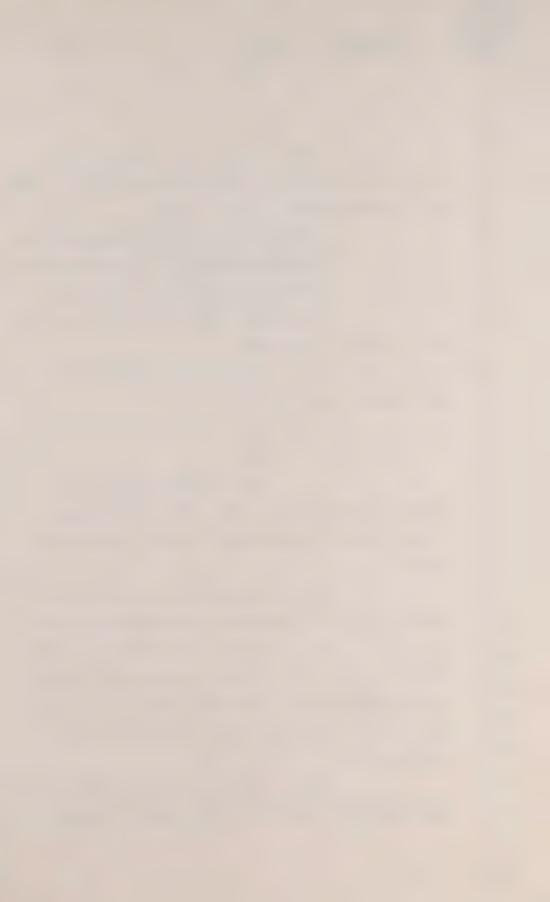
Q. And the rest of the arrest effort is summarized on page 57 and resuscitation stopped after 40 minutes and the child was declared dead.

sudden and, as it turned out, irreversible decline?

A. Well, I was surprised because when I went for my lunch she was all right and when I came back, you know, in an hour and a half or in an hour she took a turn for the worst, I couldn't

Were you surprised at Baby Gardner's

Q. Did you ask anybody what could have happened to send the child into that sudden



recall.

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and dramatic decline?

A. No.

Q. Did you hear any discussion of what could have happened to her?

A. There might be but I don't

Q. You don't recall it now.

Did it occur to you at some time following that

arrest that the events of that night of March 17/18

again paralleled those of the nights when Baby

Gage and Baby Estrella had died; that is to say a

child whom you had not expected to die that night

had been stable, you had gone off for a lunch break

leaving the child with someone else, you had come

back the child is in the same condition and an hour,

and an hour and a half in this case later, the child

goes into a sudden decline and cannot be revived.

Did it occur to you following Charlon Gardner's

death that same pattern had occurred on two other

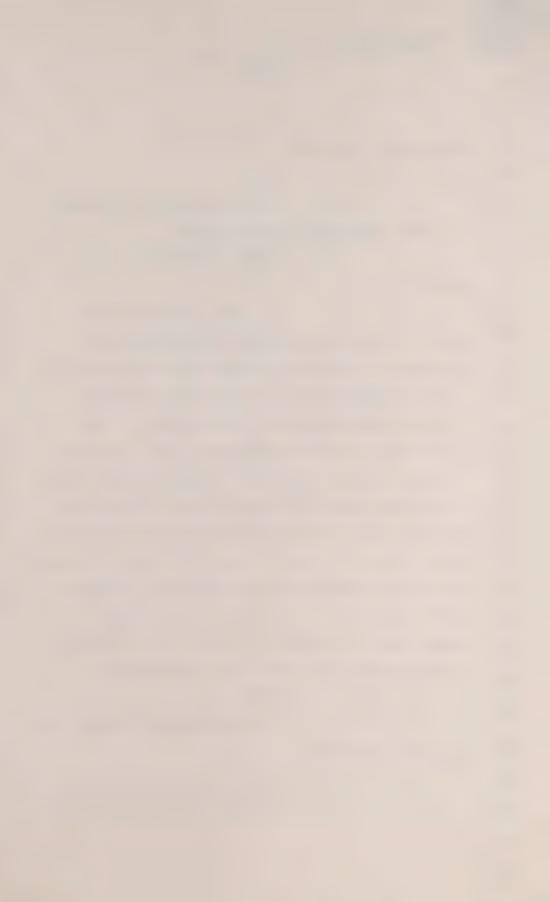
particular occasions that you could remember?

A. Yes.

Q. Did you draw that parallel to anyone's attention?

A. No.

Q. Did you once again ascribe the



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parallel simply to coincidence?

- A. And bad luck.
- Q. And bad luck. Did you on this occasion remark that on each of the three particular occasions that you could recall the person who had been with the child while you were away was Mrs.

 Trayner?

MS. FORSTER: Mr. Commissioner, I telieve the evidence is that she doesn't know who relieved her but she presumes it was Mrs. Trayner.

MR. LAMEK: I am sorry, you are absolutely right, we don't know.

Q. So, you couldn't draw that parallel if you couldn't remember.

A. No.

Q. Well, Miss Forster is right, Mrs. Scott has said she cannot recall who relieved her on this occasion. That is your evidence, isn't it?

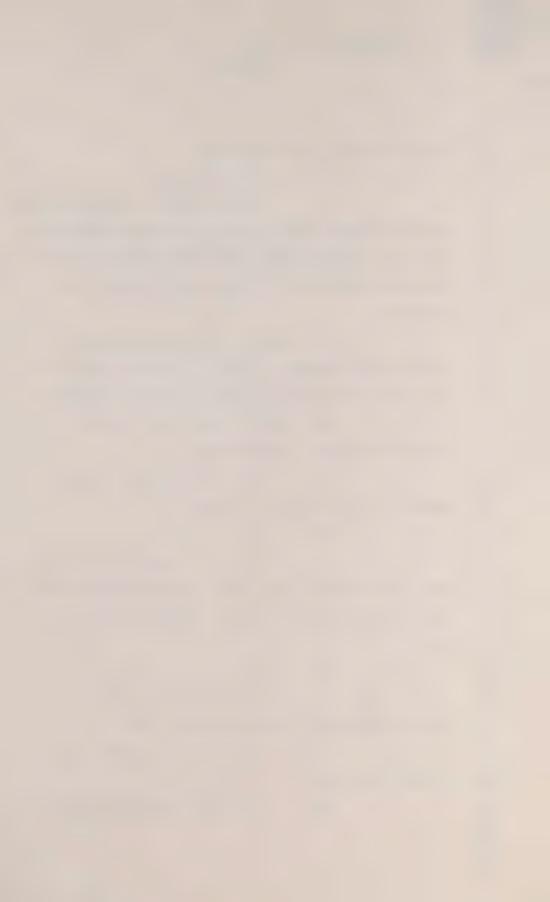
A. Yes.

Q. Do you recall whether you

were relieved by a nurse from 4B's side?

A. No. We don't usually relieve on the other side.

Q. You don't usually relieve on





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the other side	of the	ward?
,	Α.	No, unless we were very, very
busy.		no, angest we were very very
_	Q.	It would have been unusual
to have been re		from an RN from the 4B side?
	A.	
		That's right.
	Q.	Had you been so relieved by
an RN from the	4B side	would that have been sufficiently
unusual that yo	ou would	recall it do you think?
	A.	Yes.
	Q.	And I suppose the arrest
becomes a matte	er of ar	gument as to who was left to
relieve you on	that ni	ght. But you have no
recollection?		
	Α.	No.
	Q.	And you did not discuss with
anyone the para	allel tha	at you saw on that night with
Estrella and Ga	ige?	
	Α.	No.
	Q.	Going off for lunch leaving
a stable child,	coming	back to find a stable child
who thereafter	rapidly	declined?
	Α.	No.
	Q.	All right. By the time of

Charlon Gardner's death had anyone else remarked upon



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that pattern that you had said you already noticed, going off to a break leaving a stable child, coming back having that child turn sour on you?

A. Not that pattern but the hours between 2 and 3:30.

Q. All right, people had begun to recognize that children were dying in those early hours of the morning?

A. Yes.

Q. But so far as you know no one put together that observation with the one that you made, that is to say, these are children who were stable before my break and turned sour when I came back from my break?

A. As far as I know, yes.

Q. All right. Did you administer any digoxin to Charlon Gardner the night that she died?

A. I don't recall. I could look.

Q. Well, page 102 is the med sheet I think. It appears that at 9 o'clock at night you signed for a dose of digoxin to the child.

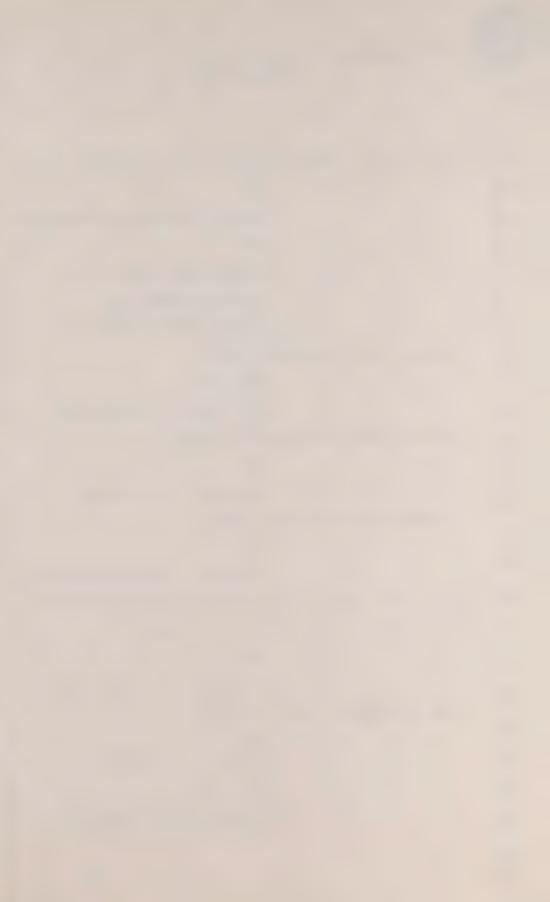
A. Yes.

Q. Are you satisfied that the dose of digoxin that you administered to the child



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2	at 9 o'clock in the evening was the prescribed dose?
3	A. Yes.
4	Q. Did you check it with somebody?
5	A. Yes.
6	Q. Do you recall who it was?
	A. No, I am afraid not.
7	Q. Do you normally check the
8	dose with the registered nurse?
9	A. Yes, we do.
10	Q. And I take it a registered
11	nurse on your own side of the floor?
12	A. Yes.
13	Q. All right. But you can't
	remember who it was that night?
14	A. No.
15	Q. All right. Did you see anyone
16	else - I am sorry, you also administered aldactazide
17	to the child, did you not at 9 o'clock?
18	A. Yes.
19	Q. And again you are satisfied
20	that that was the prescribed dose?
	A. Yes.
21	Q. Was that also checked?
22	A. No.
23	Q. You don't have to check
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child?

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aldactazide?

A. No.

Q. Did you see anyone else administer any medication of any kind to that child prior to the time of her arrest?

A. No.

Q. Mrs. Scott, I asked you this earlier but I will ask you it again because we have now looked at three particular cases. Do you recall any other child who died in the period from July, 1980 to March, 1981, any particular child where that same pattern or sequence of events was repeated, the one that we have seen in the cases of Gage, Estrella and Gardner. You have told us that you had that general impression, you could remember those three particular cases. Can you remember any others?

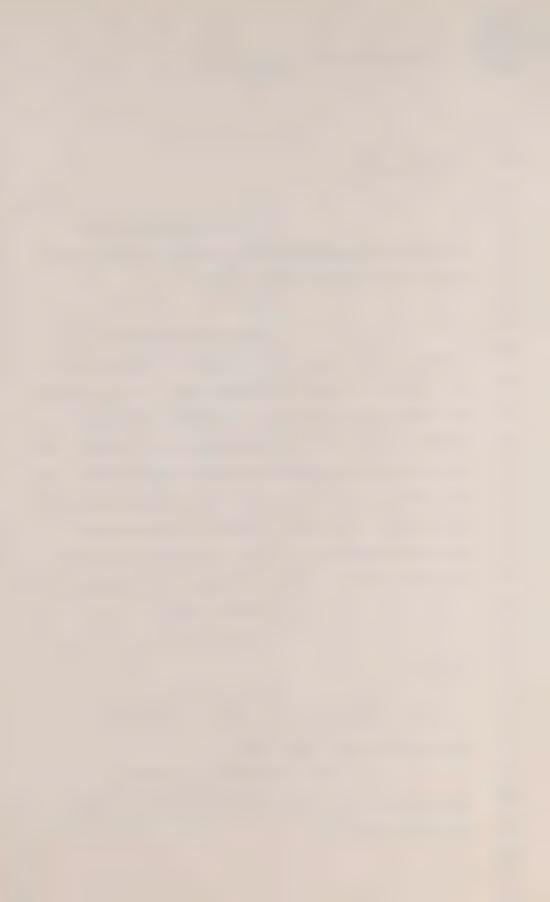
A. Offhand, Fazio.

Q. You think Fazio was such a

A. Yes.

Q. I wonder, Mr. Registrar, if we could have the Fazio chart.

Fazio died the early morning of February 4th and he was not a child who was under your care, was he?



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she?

A.	No.

0. He was under the care of Miss Nelles I believe?

> A. Yes.

Now, by reference to the chart. by all means if you think it would be of assistance to you, what do you recall about the events of the night that Fazio died that prompt you to say that that was another child where the sequence of events was as we have observed it in the cases of Gage. Estrella and Gardner?

Well, I remember Susan Nelles and I were having lunch outside and I think she finished it and she said she was going to go back to the room and I hadn't finished my lunch yet, I think we were having a late lunch that night.

0. Yes. Now, why is it remarkable that you and Susan Nelles were having lunch together at the same time?

Because I remember her saying that she was going back to the room.

> Q. And she left before you, did

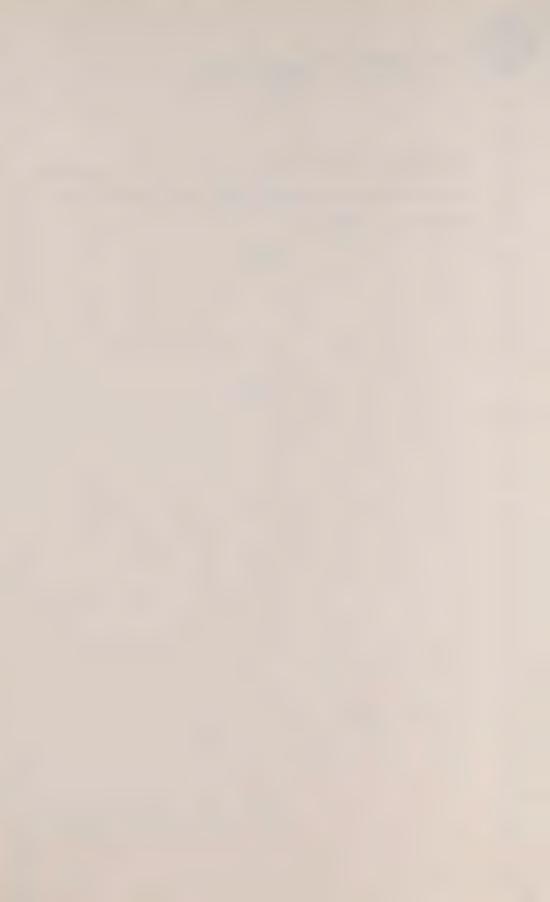
Α. Yes.

Now, that's the long night duty Q.



of February 3 to 4 and Miss Nelles had four children in 418, Fazio and another child, and you had four children in Room 418?

A. Yes.



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Q. Mrs. Christie had four in Room 425, one in 423 and two in 426, and there was a relief RN, Miss Olimpo, who had five children in 421. Mrs. Trayner was in charge and had no patients at the time. Your recollection is that Miss Nelles left before you did to go back into Room 418?

A. Yes.

Q. How is it she only had two children according to this?

A. I don't know.

Q. She seems to have an easy task that night.

A. Maybe there were only two other patients in there.

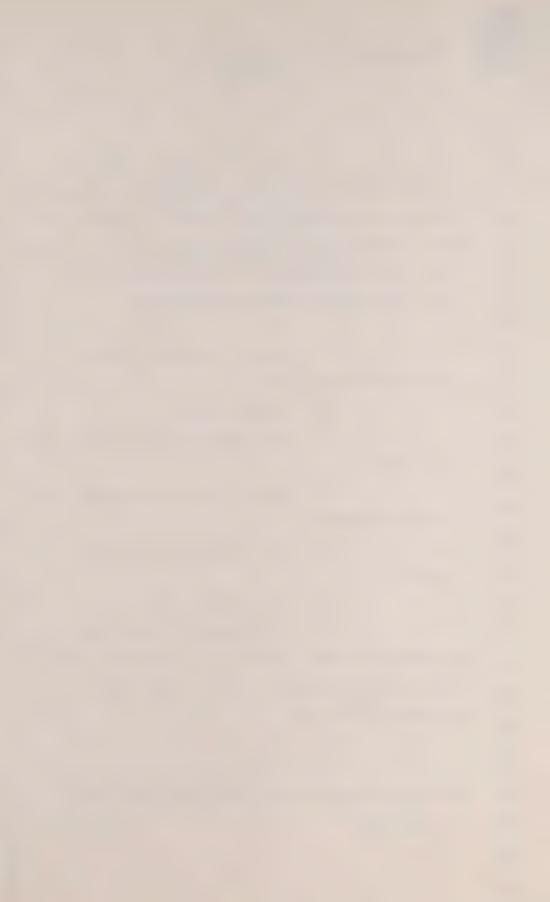
Q. No, you had four in there yourself.

A. Oh, I don't know.

Q. Six patients in the room and she had two of them. None of the children in 418 I take it were on constant care or shared care or anything of that sort?

A. No.

Q. So there was no reason why the two of you should not have been out of the room at the same time?





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MR. BROWN: I don't know whether there was or was not shared care nursing. In looking at the assignment book it appears that that long day Miss Partridge was assigned only two children, Fazio and another child.

MR. LAMEK: Yes, it does.

MR. BROWN: And going back to the previous night it appears the same, Miss Nelles had the same two children the previous day and Miss Partridge had the same two children. Indeed there may have been a shared care order on those two children.

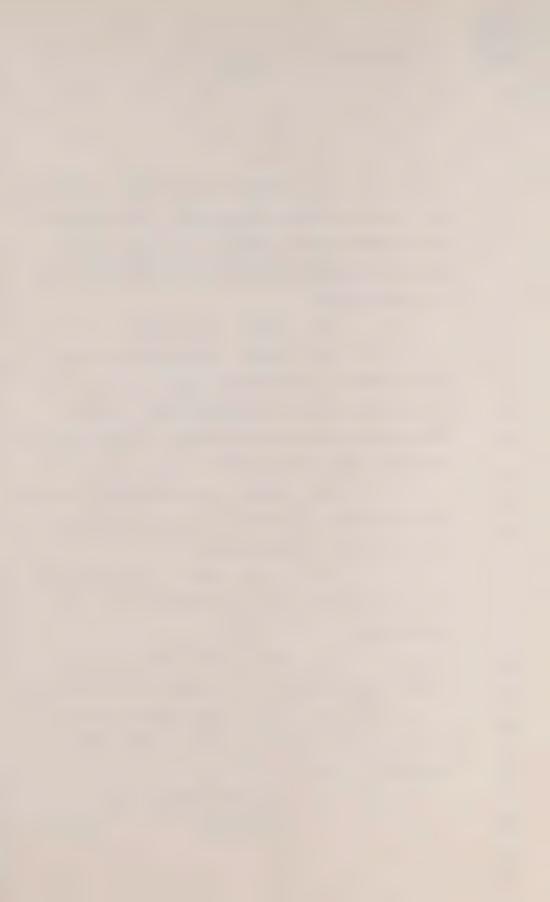
MR. LAMEK: It may have been but I am not aware of one. I agree that is an inference one might be able to draw from that.

0. Do you have a recollection of whether Miss Nelles' patients that night were on shared care?

No, I don't know, I just A. remember that she wanted to go back to the room.

Is it your recollection that they were not on shared care, or you don't have any recollection at all?

- No recollection at all.
- I'm sorry? 0.



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was eating.

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24 25 A. No recollection at all.

0. They may have been but you don't

A. Yes.

0. Nevertheless she went back to the room before you did?

> Α. Yes.

And you said you were having late lunches that night?

> Α. Yes.

Do you recall why that was? 0.

Α. I don't know. I think most

probably it was Yvonne Lyons, she had late lunch too and that is why when the Code was called, and she made the remark "Oh, just when we were having lunch", and I think that is what made me think.

Okay, Yvonne Lyons you think was having a late lunch too then?

> A. Yes.

0. Were you and she still out having lunch when the Code was called?

> I think I was finished but she A.

You were still out at the nursing station?



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Α. Yes.

How long after Miss Nelles had 0. gone back to Room 418 was the Code called?

> I don't know, one and a half or A.

0. You still couldn't have been out having lunch?

Α. No, but I wasn't having lunch at that time.

I am sorry?

I wasn't having lunch at that A. time I was at the nursing station.

Q. Let me get the sequence correctly, I am getting confused. Approximately what time did you and Miss Nelles go and have your lunch that day, that night?

> A. I don't recall.

0. But it was late?

A. Yes.

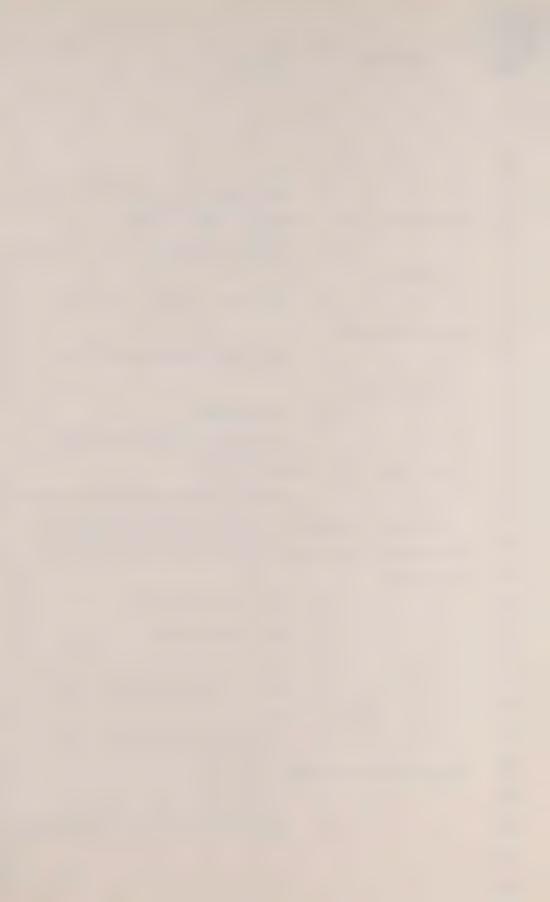
Q. After 1:30 your normal time?

A. Yes.

Miss Nelles went back to the full room, 418, before you did?

Yes.

How much before you did, roughly?



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A. I was just going to have my lunch and she went back.

Q Okay, you came out to have your

A. Yes.

Q. And very shortly after she went

back to the room?

A. Yes.

Q. And about how long after Miss Nelles went back into the room was the Code called?

A. About one and a half to two

Q. One and a half to two hours?

A. Yes.

Q. Do you know whether there was - when you came out of the room, did you come out of 418 to go to your own lunch that morning?

A. Yes.

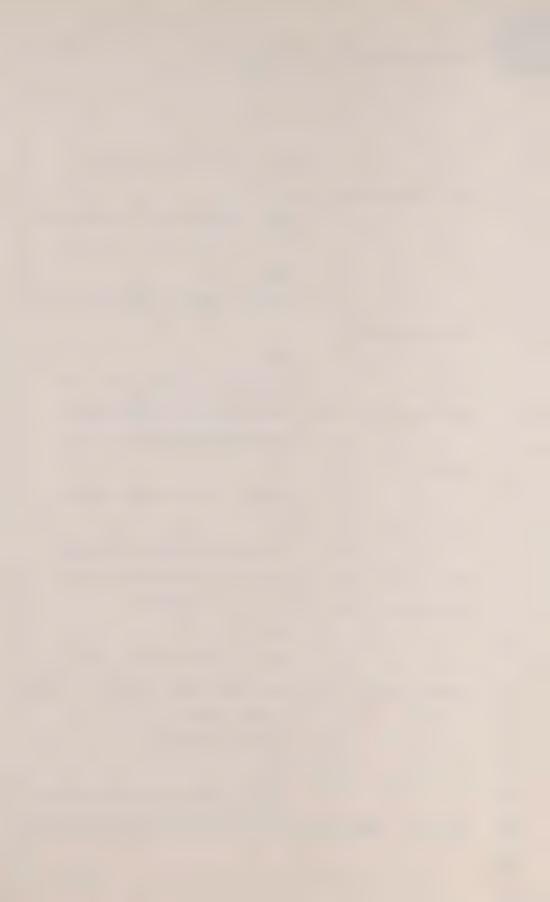
Q. When you left 418 was there anyone else in that room, other than patients of course?

A. I don't recall.

Q. You don't recall?

A. No.

Q. If Miss Nelles went back shortly after you came out into the room there wasn't a great





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deal of time for someone to be there while neither one or the other of you was there, is that fair?

A. Yes.

Q. Still that is the case where you remember where I take it prior to the break, whenever it was, it was your impression that Baby Fazio was stable?

A. Yes.

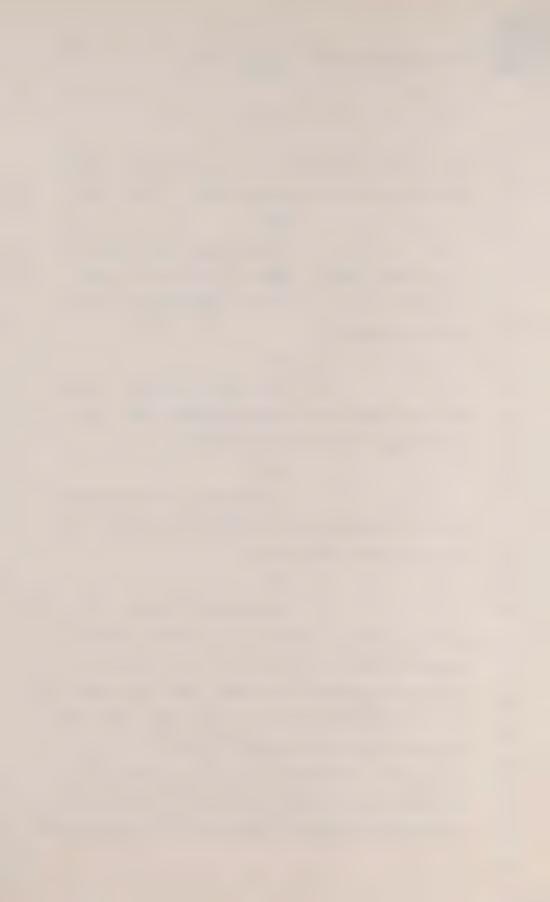
Q. And then an hour and a half to two hours after the break he suddenly went into a decline and had an arrest and died?

A. Yes.

Q. Is there any other child that you can remember where the events of his final night fell into that same pattern?

A. No.

Q. Forgive me a moment, Mrs. Scott, please. Okay, we passed over a number of deaths which occurred while you were on duty and I wanted to get to Charlon Gardner, Mrs. Scott. Let me go back and ask you what if anything you can recall about them. You have already mentioned Fazio to me who died the long night of February 3 to 4; Baby Thomas died the long night of February 11 to 12. You were on duty that night and you were assigned to the care of that





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child, do you recall that?

A. Not very clearly.

You don't recall him very clearly?

A. No.

Q.

Can you tell me what you do recall about that child and the events of that night, the night of her death; would it assist you again to have the chart available to you?

> Α. Yes.

Does the chart assist you in recalling the events of that night or anything about the child, Mrs. Scott?

No.

It does not particularly?

A. No.

You have no particular recall

then of Jennifer Thomas?

A. No.

0. You were also on duty the night of March 6th and 7th when Colleen Warner died, and again you were assigned to care for that child that night; do you have that chart?

> A. No.

MR. LAMEK: I am sorry, Mr. Registrar, I should give you a couple of names at the same time,



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why don't I do that. Could we have please Warner, Hines, Gionas, Manojlovich, Pacsai and Inwood. I am sorry, Mr. Registrar, we will try to save you constant trips.

Q. Do you have the Warner chart there, Mrs. Scott? Colleen Warner was your patient the night that she died and she died in Room 418. Do you, with perhaps the assistance of the chart, have any recollection of that child and of the events of the night of her death?

A. I am sorry, are you waiting for

Q. Yes, indeed, if you have any recollection now of Baby Warner?

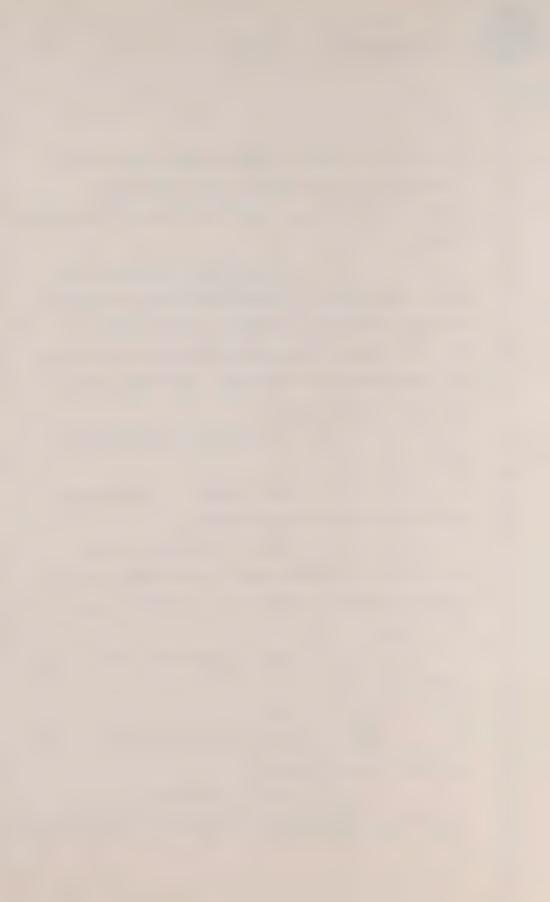
A. She was admitted at about 10 o'clock by Emergency, but I can't recall whether I went down myself and got her, or somebody else got her for me.

Q. Did you admit the child to the

A. Yes.

Q. And having admitted her to the ward what did you then do?

A. Well, I remember she was constantly crying and very irritable and very difficult





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to settle, and I spent a lot of time with her, and I didn't have much time to talk to the parents so Susan Melles took the history for me. I remember the parents asking me - apparently the doctor had explained to the parents that he was going to do some operation or something like that.

> 0. Yes.

I don't know whether he explained to the parents in the nursing station on 4A or he did that down in Emergency, I can't recall that. The parents were very undecided whether to have the operation or not.

Yes.

I told them, they looked very tired so I said I don't know what the doctor told you, I think it is better for you to go the hostel, I think they were staying in the hostel, I am not sure, I said it is better for you to go back now and have a good night's rest and then tomorrow they could ask the doctor again to explain to them what he was going to do.

Surgery had been recommended and they were undecided as to whether to accept the recommendation?

> A. Yes.



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Q. And your very good advice to them was to get some rest and get some more information tomorrow from the doctor?

A. Yes, if they were not sure.

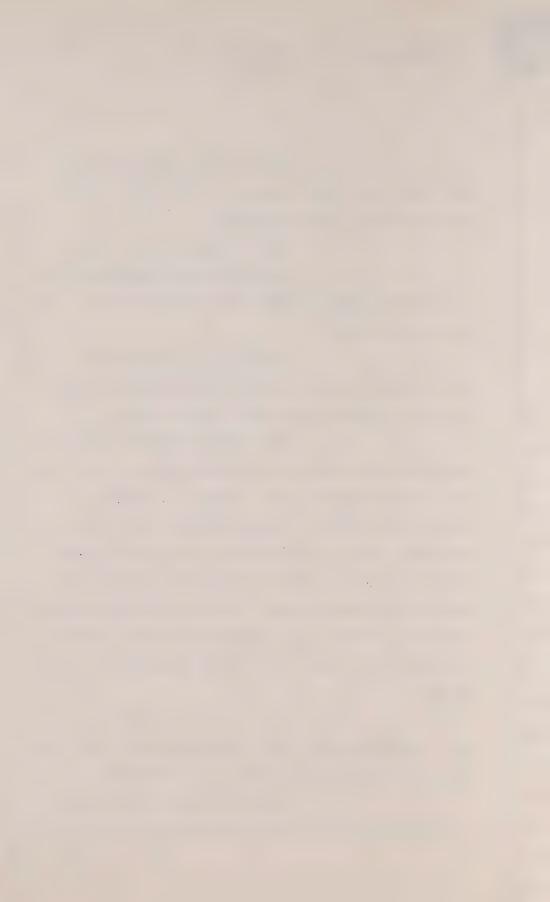
Q Do you have any recollection of the child's course during that night and prior to the time of her arrest?

A. At first as I said she was very irritable and very difficult to settle but she did settle down by the time J went to lunch.

Q. Your nursing note is found on page 55 of the chart and it records, as you have said, that you admitted the baby: "Using 40 per cent oxygen with a hood". You record the vital signs on admission. Then perhaps almost a third of the way through your note: "Apex ranging from 136 to 156 and irregular until around 0300 when the rate rapidly dropped to 72 and very irregular with long pauses. Blood pressure dropped to 70 over pulse and Dr. Kantak called."

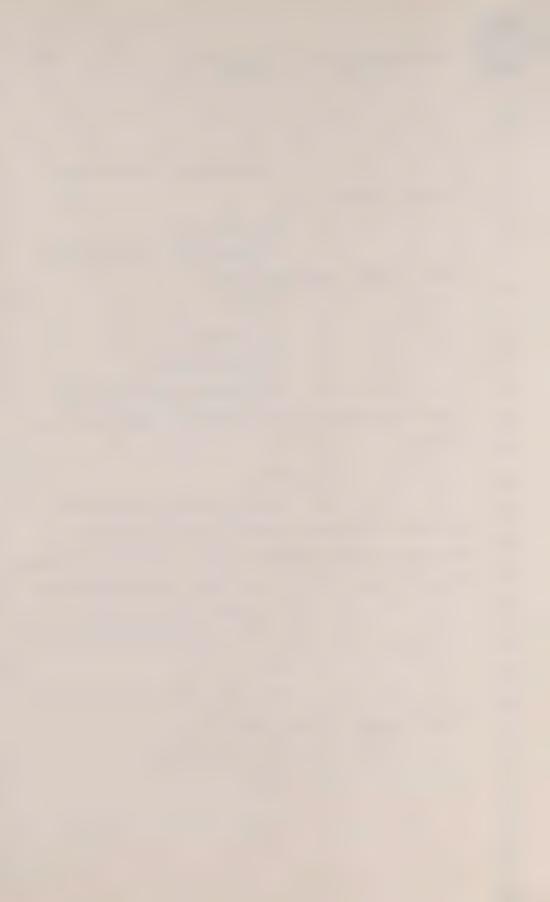
How much time did you spend with this child, from the time of her admission until she got into trouble at 3 o'clock in the morning?

A. I spent a lot of time before I had my lunch break because she was so irritable.





Ω. Do you recall what time you
went for lunch?
A. No, about 1:30.
Q. Did you look in on the child
Then you came back from lunch?
A. Yes.
Q. And how was she then?
A. She was sleeping.
Q. Do you have any recollection
of the approximate time you got back from your lunch
55.00%
A. No.
Do you recall how long after you
got back from lunch that she got into trouble? We
know she got into trouble at 3 o'clock in the morning.
About now long had you been back when that occurred?
in I loodil I well Ill to liave a
look at her and I went in to see my other patients.
Q. Yes.
A. And then I went back into the other room, oh, an hour and a half.
Q. As much as that?
A. Yes.



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back from lunch at about 1:30. Would that be right? A. Possible. 0. You had an earlier lunch then.

That would suggest you got

- A. It is possible.

0. Do you know? Do you recall?

No. A.

0.

But again some time elapsed 0. between your return from lunch and the events that you record in your note on Page 55 of the chart? That is to say that the heart rate dropped very rapidly to 72, long pauses, became very irregular. Blood pressure dropped. By 5 minutes past 3 the apex was hardly audible and at 6 minutes past 3 a Code 25 was called.

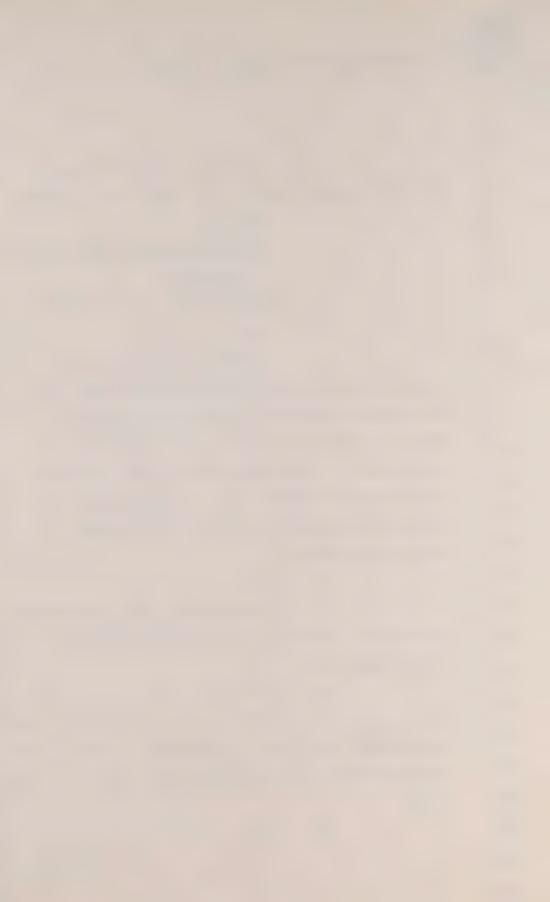
> Α. Yes.

Some period of time then elapsed 0. between your return from your break and those events happening.

Yes.

The child was not on any constant or shared care and therefore there was no need for you to be relieved when you went for your break. Is that true?

> A. Yes.



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Q. Do you recall anything else about the events of that night, Mrs. Scott?

A. No.

Q. Can we go back briefly to a

Let we referred to this morning and that is the case

L. Kelly Ann Monteith? This is jumping around and

m sorry it is out of sequence. It was the night of

m nday, August 18th. You were on duty.

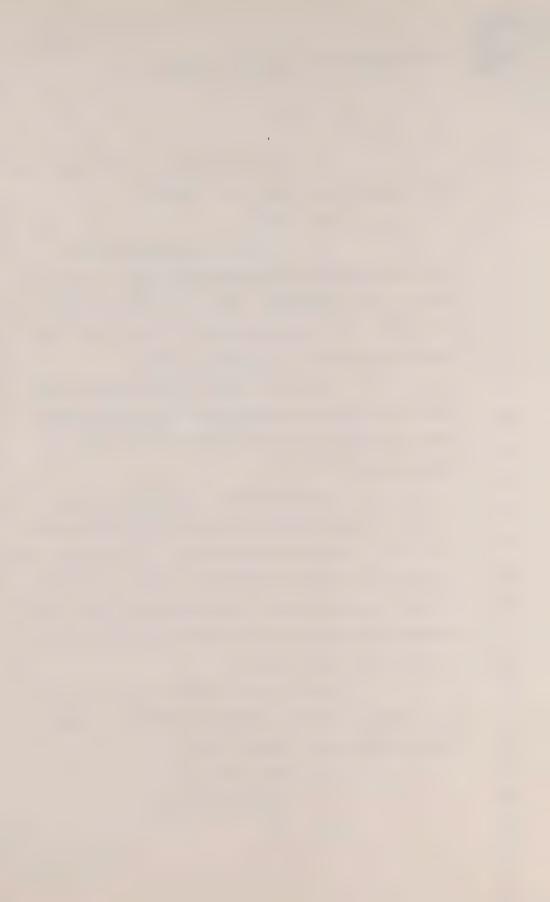
You had a couple of children in 418; three in 421 and one in 426. Miss Nelles was working and she had two patients in Room 418, Monteith and another child.

Let me show you the assignment book for a minute. It is page 105 of tab 89, Mr. Commissioner.

Now the two children for whom Miss Nelles was caring in Room 418 had during the day shift been on shared nursing care as indeed they had the -- sorry, Monteith and another child in 418 had been on shared care the day before as well.

Do you recall whether Miss Nelles' two children in 418 on the night of Monday, August 18th, were on shared nursing care?

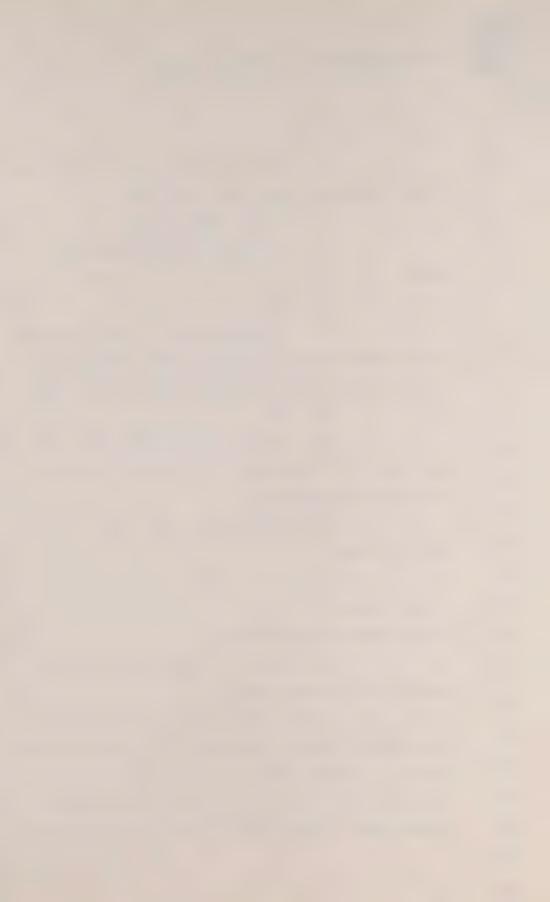
- A. No, I do not.
- Q. You don't recall?
- A. No.





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2	O. Do you recall seeing Miss Nelles
3	outside Room 418 at any time that night?
4	A. No. I am not sure.
5	Q. You have no recollection of
6	that?
	A. No.
7	Q. Do you recall if Miss Nelles was
8	present when you went out for lunch? I mean present
9	at the nursing station when you were out for lunch?
10	A. No.
11	Q. Well, let's get that into sequence,
12	but I see, Mr. Commissioner I have not forgotten
	the afternoon break time.
13	THE COMMISSIONER: All right. We will
14	take 20 minutes.
15	
16	Short recess.
17	On resuming after the break.
18	MR. LAMEK: Q. Mrs. Scott, we have
19	talked about Colleen Warner.
11	On the night of March 7 to 8 Jordan
20	Hines died. You were relieving on Ward 4B that night
21	which is, of course, the side of the ward upon
22	which he died. You were not assigned to care for

Jordan Hines. Do you have any recollection of that





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child or the events of that night leading to the child's arrest?

THE COMMISSIONER: Now you say Jordan Hines was on 4B, was he? Is that right? MR. LAMEK: Yes, sir.

THE COMMISSIONER: That is right. think that is right but you have got A on your chart. MR. LAMEK: I think not, sir. That is the CDC category under his name.

THE COMMISSIONER: Oh, I beg your pardon. I take it all back. Yes, you are quite right. MR. LAMEK: O. Now, Mrs. Scott, you were relieving on 4B that night were you not?

> A. Yes.

The rest of your team was on 4A 0. but you were working over on 4B that night?

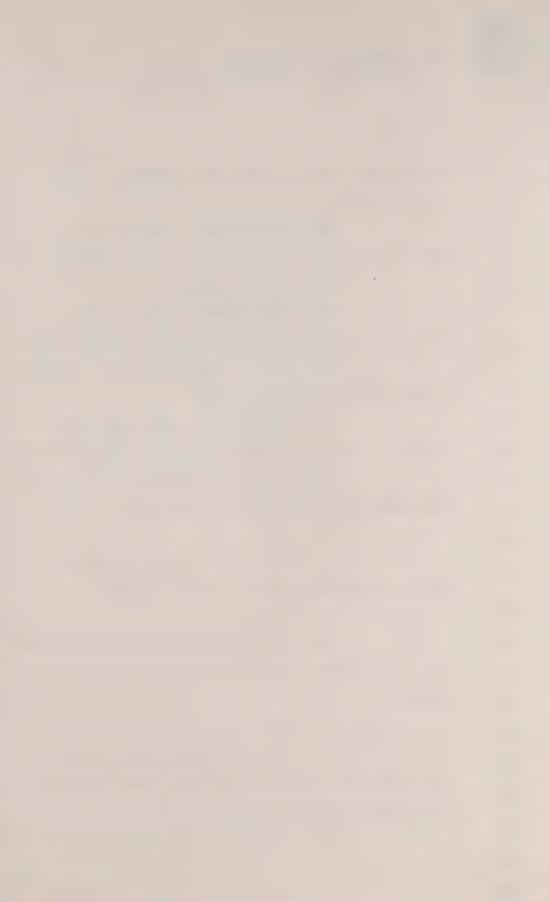
> Α. Yes.

But you say you have no recollection of the child or any of the events leading to his arrest?

> Α. No.

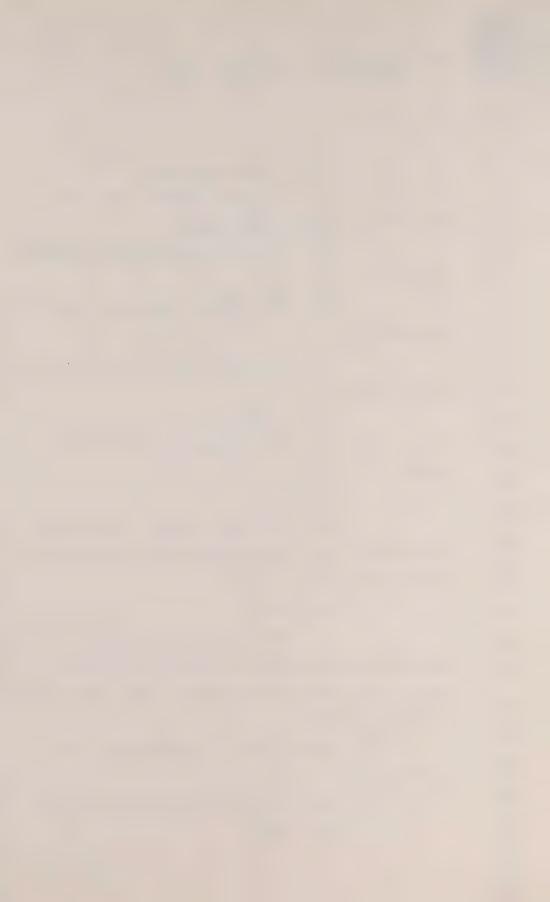
0. Did you in the course of the shift that night up until the time of the arrest see on 4B anybody from Ward 4A?

> Α. Yes.



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2	Q. Whom did you see?
3	A. Phyllis Trayner. She came into
4	the room and looked at the babies.
5	Q. Did she come into the room where
Ö	you were?
	A. The babies' room and I was
7	there, too.
8	Q. I'm sorry, what do you mean by the
9	babies' room?
10	A. In 4B.
11	Q. She looked in all the patient
12	rooms?
13	A. Yes.
14	Q. You were in Room let me see.
	Do you recall what room you were in? I only have you
15	relieving over on that side.
16	A. On 4B?
17	Q. Yes. You are not shown in the
18	assignment book as being in any particular room.
19	Maybe we can look at the assignment book and you will
20	be able to remember.
21	At page 119, Mr. Commissioner, tab 14
22	on Exhibit 32A. Here we are. You are the RN from 4A.
23	A. Yes.
	n. 165.
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		Q.	•	Does	tha	at	mean	γс	u	were	th	ie
Lef	nurse	who	is	shown	as	ha	ving	a	ch	ild	in	4113

A. Yes.

Two in 414 and one in 410.

Α. Yes.

0. Because there is another note RN relief being with Manojlovich. You were not with Manojlovich that night?

> A. No.

Q. So you had four children.

A. Yes.

0. One in 414, two in 411 and one

Α. Yes.

0. You didn't have any child in the room in which Jordan Hines was which was 431.

> Α. No.

0. When you saw Mrs. Trayner where

was she?

sorry --

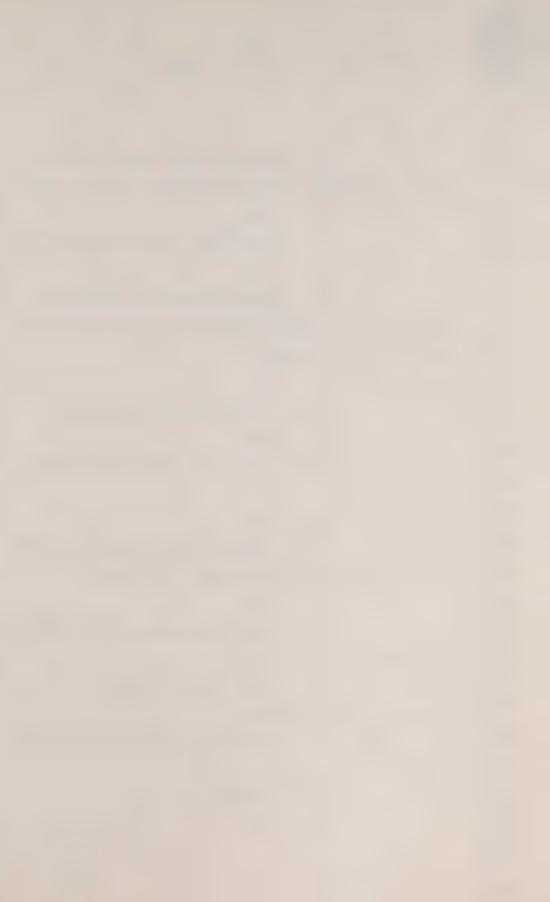
in 410?

We were in the babies' room Α. looking at all the babies.

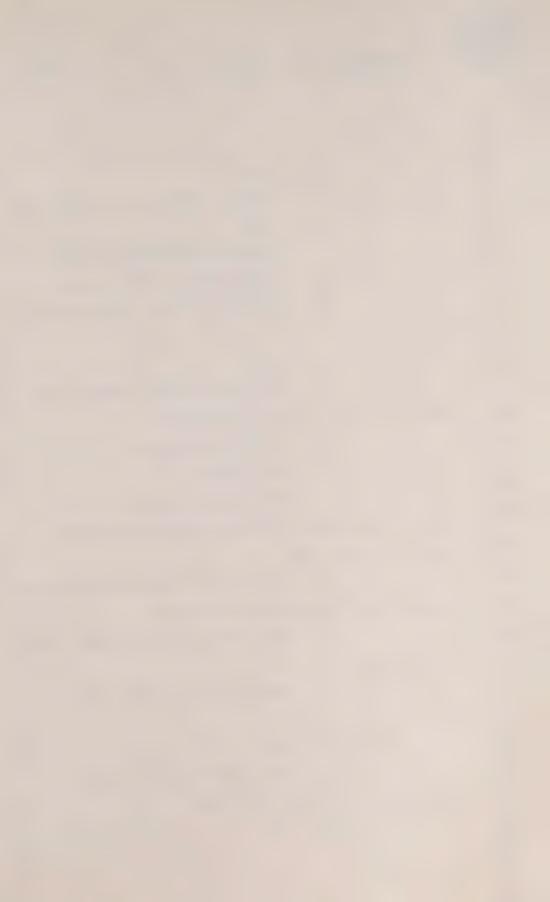
Q. You say the babies' room, I'm

In 431. A.

Q. 431?



	<u> </u>	
1 "	1 .	
2	A. Yes.	
3	Q. You were there at the	same time
4	A. Yes.	
5	Q. What time of night wa	s that?
6	A. It was during coffee	time.
41	Q. Sort of 10 to 11, that	t sort of
7 '	time?	
8 ,	A. Yes.	
9	Q. How long did Mrs. Tra	yner stay
10.	over on 4B side, to your knowledge?	
11	A. About five minutes.	
12	O. All right.	
13	A. When she was with me.	I don't
	know, I can't recall whether she went back	there
14.	or not. I don't know.	
15	Q. You saw her there for	about five
16	minutes, some time around 10 or 11:00.	
17	A. Yes. We just had a	quick look
18	at the babies.	
19	Q. And was one of these	Jordan
20	Hines?	
1	A. Yes.	
21 !!	Q. Do you have any parti	cular
22 '	recollection of him at that time?	
23	A. No.	





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Q. Did you see anyone else from 4A on the 4B side that night or did you see Mrs. Trayner at any other time that night?

> Α. No.

I guess you can't help us any further then with the Hines matter.

The following night, that is March 8 to 9, Baby Gionas died in Room 418 and you were on duty on Ward 4A that night although not assigned to Baby Gionas. Indeed it appears that Mrs. Trayner was caring for Baby Gionas that night.

Do you have any recollection of that child or the events leading up to his arrest?

> Α. No.

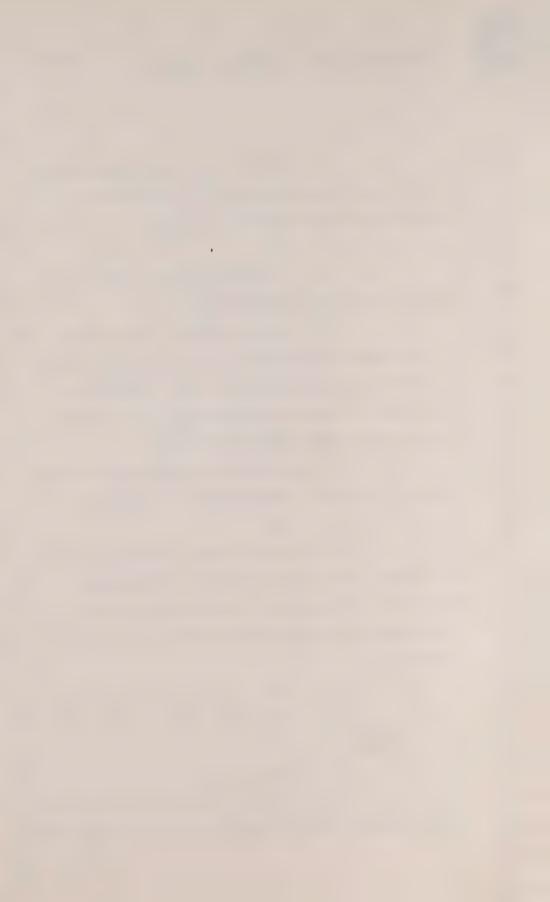
On the night of March 11 to 12 two children died, both on 4B side, Manojlovich and Pacsai. You were on 4A that night on duty. Do you have any recollection of either of those children?

> Α. No.

0. Or of the events leading up to their arrests?

> Α. No.

The next night, March 12 to 13, Kristin Inwood died on Ward 4B, and on that night you



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were relieving on Ward 4B although you were not assigned to care for Kristin Inwood.

Do you have any recollection of that

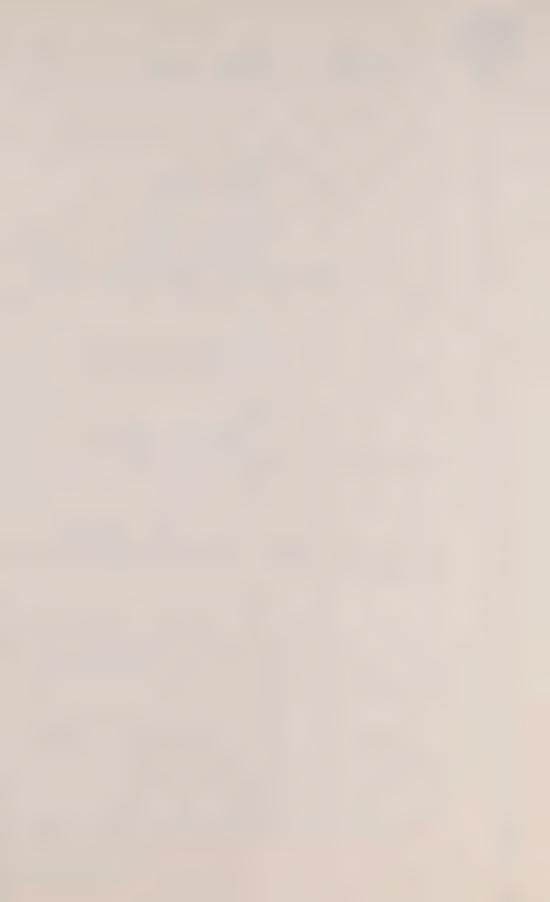
- Α. NO.
- Or of any of the events leading up to her arrest that night?
 - Α. No.
- 0. Did you that night see on 4B anybody from the 4A side?
 - I don't recall.
- O. You don't recall? That brings us chronologically to Charlon Gardner whom we have discussed.

Moving on down the list you were not on duty the night that Allana Miller died, were you?

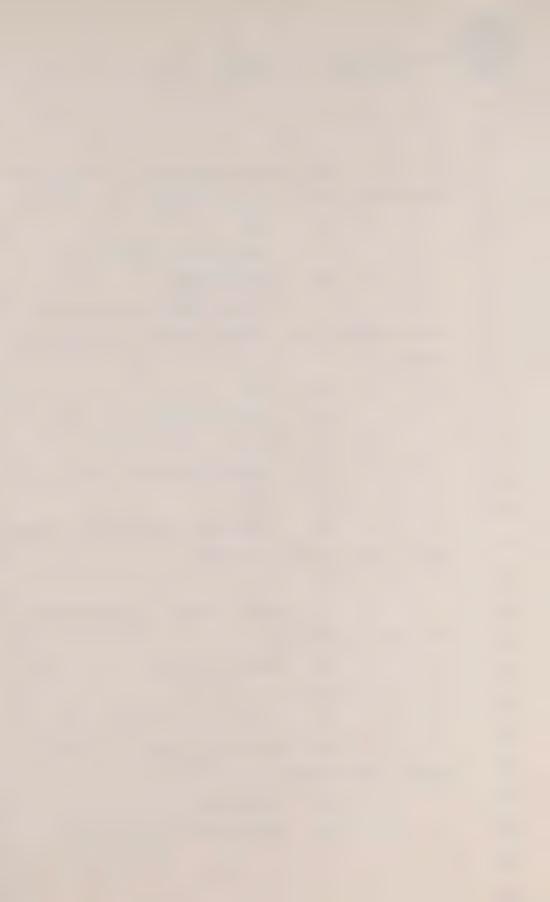
- Α. No.
- 0. Indeed you had not been on duty since the date of Charlon Gardner's death, according to the WIN sheets.
 - A. Yes.
- You went off duty on the morning following Charlon Gardner's death and were not on duty again until Saturday, March 21 when you worked the long day shift.



1		
2	Α.	Yes.
3	0.	Is that right?
4	Α.	Yes.
5	Q.	Therefore you were not on duty
	when Justin Cook die	d in the early hours of March
6	22nd?	
7	Α.	No.
8	Q.	You worked on Sunday the long
9	day.	
10	Α.	Yes.
11	Q.	I take it you learned of Justin
	Cook's death when yo	u came on duty Sunday morning.
12	Α.	Yes.
13	Q.	On the long day, Saturday,
14	March 21st, Mrs. Sco	tt, you had been assigned to car
15	for Justin Cook?	
16	Α.	Yes.
17	Q.	Cook was not on constant care
18	until after the blue	spell that he suffered at about
19	6:00 in the evening;	is that right?
	Α.	Yes.
20	Q.	During the day you had Cook and
21	a couple of other pat	tients in Room 418?
22	Α.	Yes.
23	Q.	But after the blue spell, about



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1	
2	6 in the evening, you were assigned to provide constant
3	care to him for the rest of the shift, were you not?
4	A. Yes.
5.	Q. About an hour or so?
	A. Half an hour.
6	Q. We know that Justin Cook went
7	to the catheter lab at about mid-day on the Saturday,
8,	didn't he?
9	A. Yes.
]()	Q. A little before noon I think?
11	A. Yes.
12	Q. Who took him to the lab?
ı	A. I did.
13	Q. And did you stay with him through
14	out the time that he was there?
15	A. Yes.
16	Q. What time did you get back from
17	the cath. lab with him?
18	A. About 1. 1:15.
19	Q. 1, 1:15?
	A. 1:15 to 1:30.
20	Q. When did you get your lunch
21	break on the Saturday?
22	A. Very late.
23	Q. After you got back from the



catheter lab?
A. Yes.
Q. Who looked after him while you
were away for lunch?
A. When I took the baby back into
the room Marie Mandal and Miss Cooney were there.
Q. Yes.
A. And I left them to settle Justin
Cook and I went to lunch.
O. Now from the time that you
returned from lunch until his blue spell at about
6:00, did you spend much time with him?
A. Yes.
Q. What is your best recollection of
his condition through the afternoon?
A. He was irritable. He was crying,
and he was unable to tolerate room air so he has to be
in oxygen hood most of the time.
Q. Yes. Can you tell us what is your
best recollection of what occurred when he had what
we have called a blue spell at about 6:00 in the
evening? What happened then?

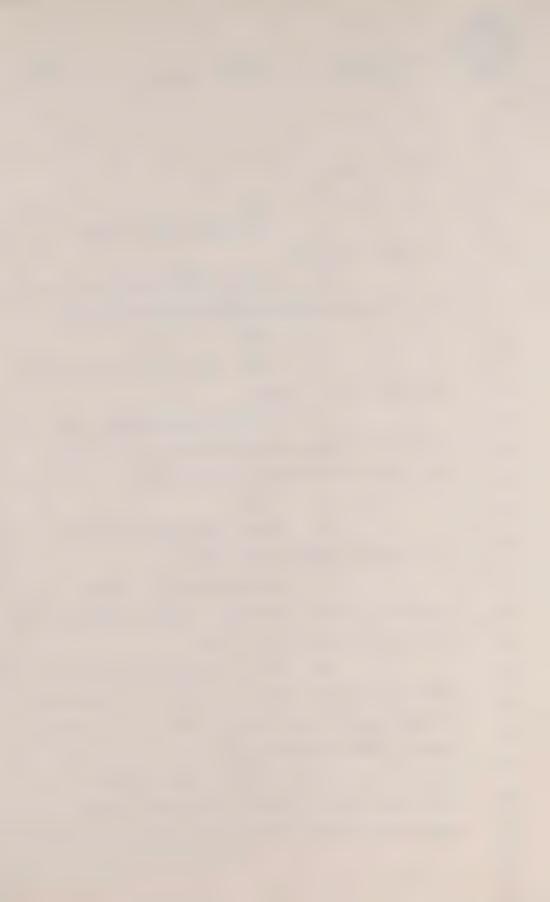
A. I went to supper and on my way

back I went up to 7G to get the Inderal because we

didn't have any suspension, Inderal suspension in the

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ward. So I came back. I gave it to him.

When I came back from supper Justin Cook's mother was with him and she was holding Justin in her arms.

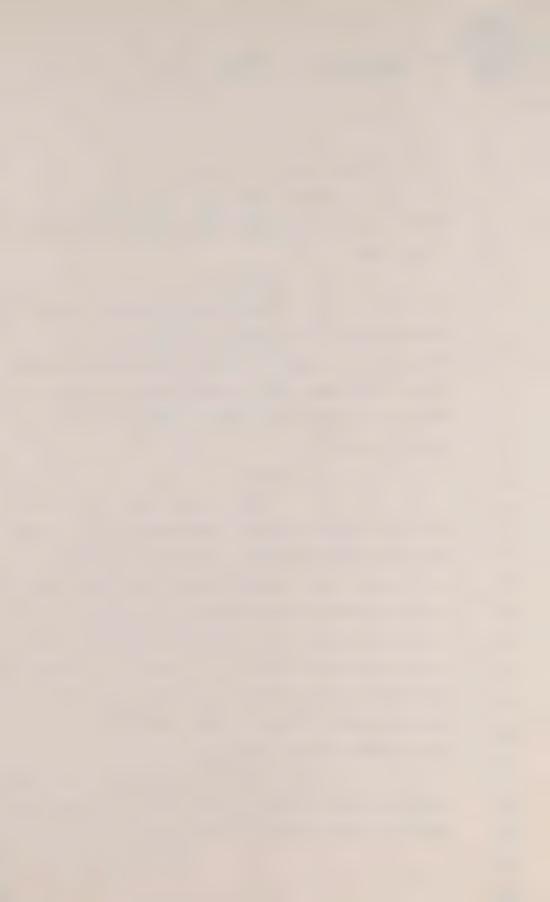
> 0. Yes.

I gave him the Inderal and he started choking and coughing and choking and his color wasn't so good so I told the mother that I want to put Justin back into the crib because he wasn't having much oxygen with just the mask held to his nose by his mom.

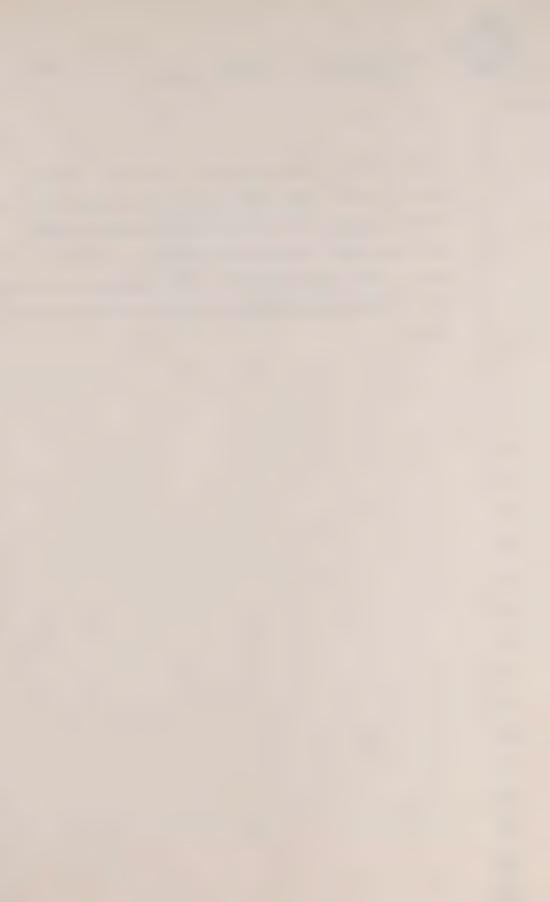
> Yes. 0.

I put the baby back on the crib and he started getting very cyanotic and just at that moment Dr. Jedeikin came in and he asked me did I give him any Inderal and I told him I had just given it to him about five minutes ago. And by that time he was really blue, very cyanotic and he said I want to give some more Inderal by I.V. push. So I left the baby with him and went out and went into the medication room to look for the Inderal to be injected into the I.V. tubing.

While I was out apparently he got worse and that is when he had the blue spell and when I was out Marie Mandal went in -- when she saw the doctor



going into the room she went in after him, and some-body, I think it was Mary Cooney, she got sort of scared and she sort of over-reacted and she pushed the crash cart into the room and when I returned to the babies' room with the Inderal Marie Mandal was drawing up, re-drawing up the drug. She got it from the crash cart.



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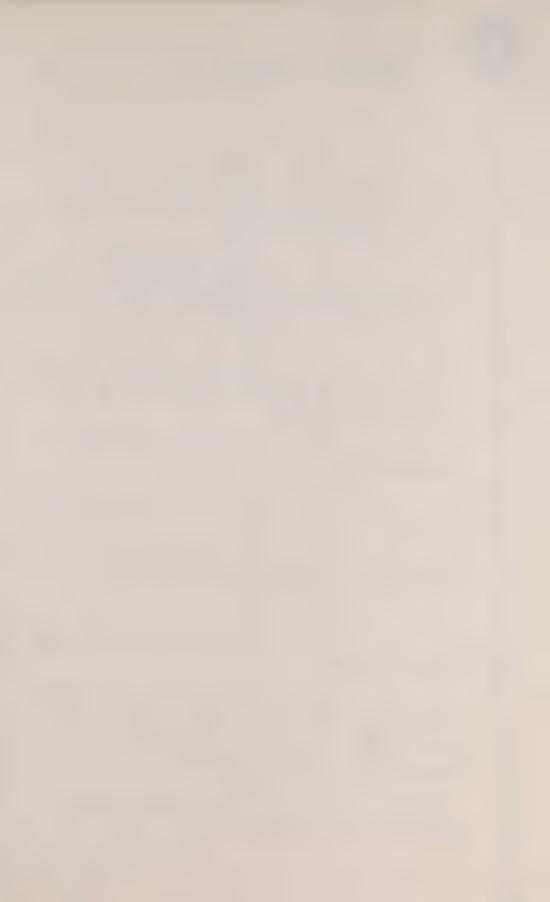
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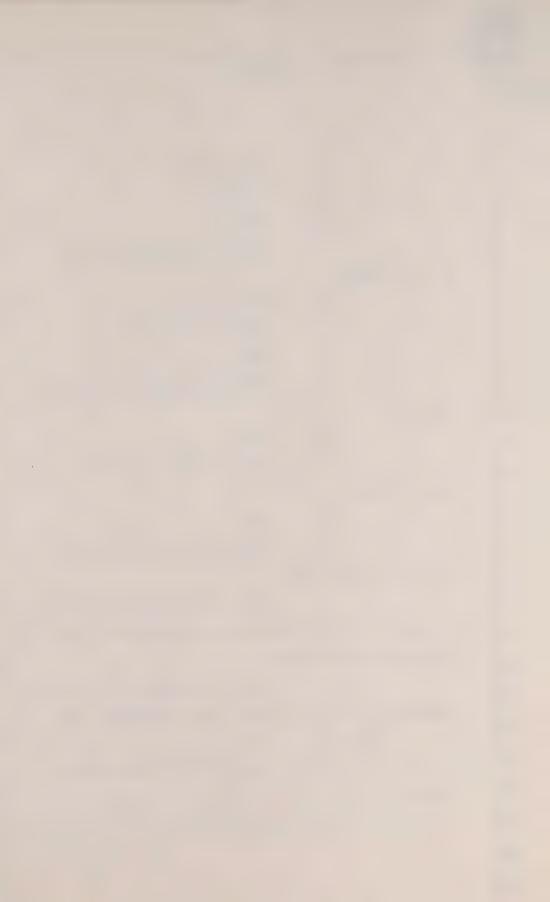
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- Q. Okay. Now, the Inderal that you got from the seventh floor, what kind of Inderal preparation was that?
 - It was a suspension.
- It was a suspension. Is that the preparation that is administered orally?
 - A. Yes.
- All right. And how did you get that material from the seventh floor, or how did you bring it down?
- I put it in a big syringe, A. a large syringe.
 - You put it in a large syringe?
 - A. Yes.
- Q. And I gather the oral preparation is produced in bottles, is it?
 - Yes. A.
- So, you draw up what you need Q. into the syringe?
- I also drew it up for another dose, for the night nurse because I thought, you know, I didn't want them to spend a lot of time looking around for the drug.
- All right, you drew up two Q. syringes of the oral preparation?





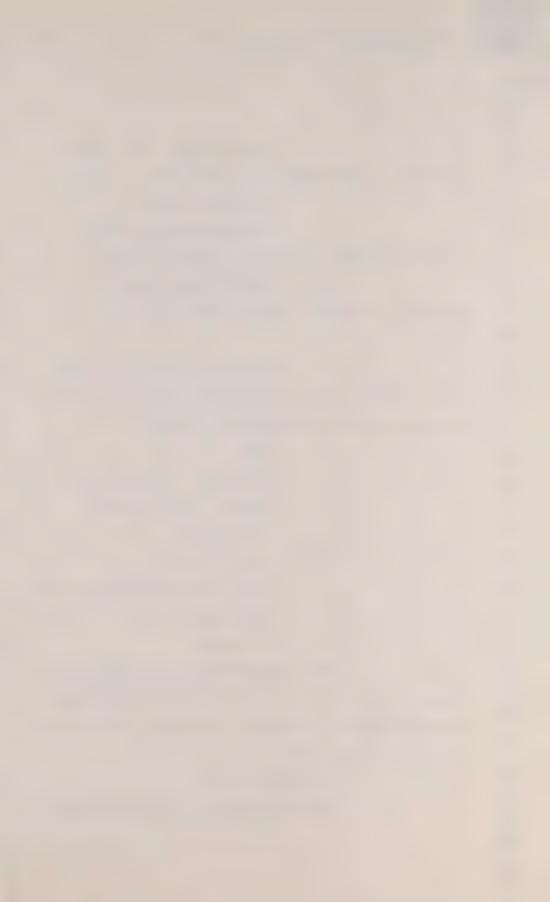
1			
2		Α.	No, just one.
3		Q.	Oh, one.
4		Α.	Yes.
5		Q.	You drew up twice as much
	as you needed?		
6		A.	Yes.
7		Q.	Okay, in one syringe?
8		A.	Yes.
9		Q.	From the oral preparation of
10	Inderal?		
11		A.	Yes.
12		Q.	And you took that down to the
13	fourth floor?		
		A.	Yes.
14		Q.	And you administered a dose
15	orally to Just:	in Cook?	
16		A.	Yes, I took what I wanted into
17	a medicine cup	and the	n drew it up again and left
18	the rest in the	e fridge	
19		Q.	Okay. You pushed out of the
20	syringe enough	for one	dose into a medicine cup?
		A.	Yes.
21		Q.	Drew that up into another
22	syringe?		
23		Α.	And gave it to Justin Cook.



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Q. And used that, the second syringe, to administer orally the dose of Inderal? A. To Justin Cook, yes. What did you do with the original syringe that still had some Inderal in it? A. I put a label on the drug, what was it and the strength and I put it in the fridge. Q. You put that in the fridge, okay. And you were satisfied that what you brought down from the seventh floor was Inderal? Α. Yes. All right. How do you know? Q. Because I got it myself. Α. I am sorry? Q. I got it myself. A. 0. From a bottle clearly marked? A. From upstairs, yes. All right. Q. THE COMMISSIONER: Do I understand this, I am getting confused, I guess it's the long layoff. You got some Inderal before the doctor was called, is that right? THE WITNESS: Yes.

THE COMMISSIONER: And you gave the



2 Inderal when the baby was in his mother's arms, is 3 that right? THE WITNESS: Yes. 4 THE COMMISSIONER: And then you put 5 the baby down in the crib? 6 THE WITNESS: And the doctor walked in. 8 THE COMMISSIONER: And what happened 9 then? THE WITNESS: The doctor came in at 10 the same time. 11 THE COMMISSIONER: Had you called the 12 doctor? 13 THE WITNESS: No. 14 THE COMMISSIONER: I see, all right. 15 And then after that the doctor came in and said he 16 wanted to give him some more Inderal? THE WITNESS: Yes. 17 THE COMMISSIONER: And then you went 18 out. 19 THE WITNESS: Went out to get the 20 valve. 21 THE COMMISSIONER: To the seventh

THE WITNESS: No, the medication room.

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floor again?

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for injection into the vein.

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THE COMMISSIONER: Why did you have to go to the seventh floor in the first place?

THE WITNESS: We didn't have any suspension.

THE COMMISSIONER: I see.

THE WITNESS: To give by mouth.

THE COMMISSIONER: Oh, I see, I see.

THE WITNESS: But we had the one

THE COMMISSIONER: Yes. So, you could then get the intravenous Inderal from the medication

cupboard?

THE WITNESS: Yes, from the medication cupboard.

THE COMMISSIONER: Yes, all right.

MR. LAMEK: Q. Yes, the order for Justin Cook's Inderal or Propranololwas for the oral preparation, was it not?

A. Yes.

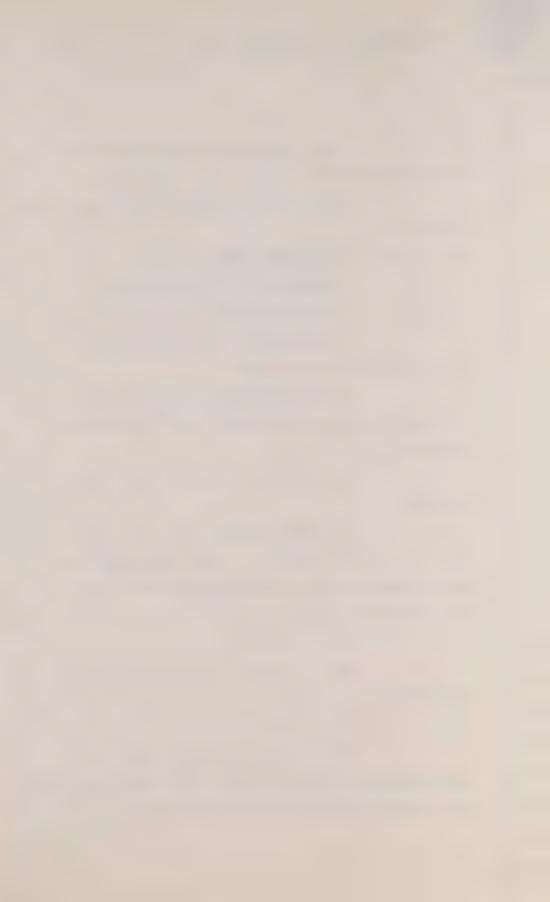
Q. He was to receive the drug

PO, orally?

A. Yes.

Q. And it was that that you were missing on the fourth floor, the oral preparation

that you had to get from the seventh floor?



give some more?

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Α. That's right. 0. Okay. You brought it down as you have told us and divided the amount that you brought into two doses, put one in the refrigerator in the syringe and drew up into another syringe the dose that you were going to administer at 6 o'clock? Α. Yes. You administered that and then 0. the child began to cough and choke and spit it up? Α. Yes. And turned blue? 0. Not too blue but cyanotic, A. yes. Q. Okay. So, you took him to his mother and put him in the crib? A. Yes. And then Dr. Jedeikin arrived? Q. Walked in, yes. A. All right. Asked if you had Q. given the Inderal and you said yes but I assume told him that the child had coughed a lot of it up? A. Yes. And he said he wanted to 0.

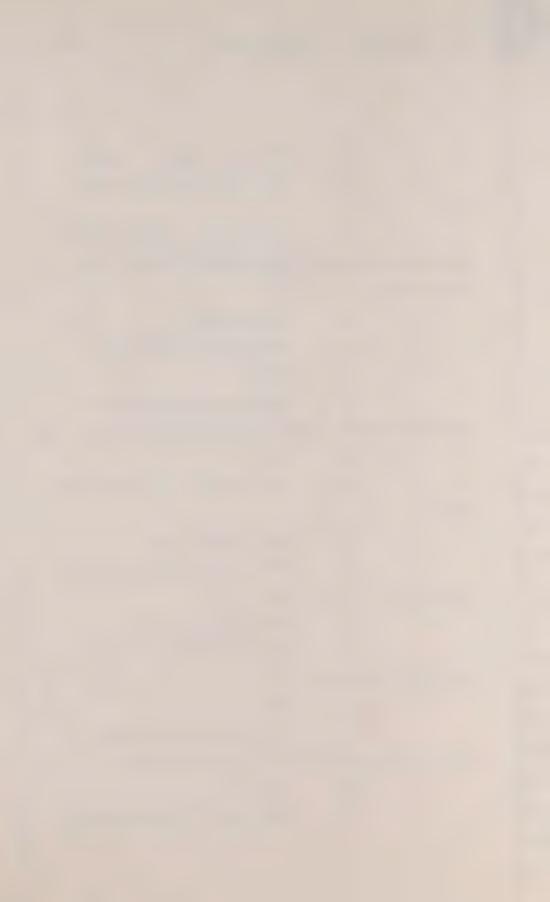
Some more.





Scott, dr.ex. (Lamek)

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2	Q.	But this time by IV push?
3	Α.	Yes, he was going to give
4	گه نـ ه	
.5	Q.	Okay. Now, you had the intra-
,	A Maration in	the medication room on the
- 5	lor?	
7	Α.	That's right.
7-	Q.	So, you went for that?
9	A. I.	Yes.
10	Q.	Before you got back with it
11	had taken Inde	eral from the crash cart you say?
10	Α.	Yes.
	Q.	And Jedeikin had administered
11	110167	
14	Α.	Marie Mandal, yes.
15	Q.	Marie Mandal had taken the IV
16	preparation from the c	erash cart?
17	Α.	And was drawing it up.
18	Q.	And was drawing it up for
19	Jedeikin to administer	tit?
	Α.	Yes.
20	Q.	How many vials of Inderal
21	did you bring back fro	m the medication room?
22	Α.	Just one.
23	Q.	Just one. Do you know what
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happened to it?

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A.	I	put	it	back	in	the	

crash

0. You replaced it, you replaced that Marie Mandal had taken from the crash 11112

> A. Yes.

All right. Did you at any Q. have anything to do with or did you see one or nor: mals of Inderal taped to Justin Cook's bed?

> A. I didn't see, I didn't actually

And I take it therefore you 0. certainly did not do that yourself?

> A. No.

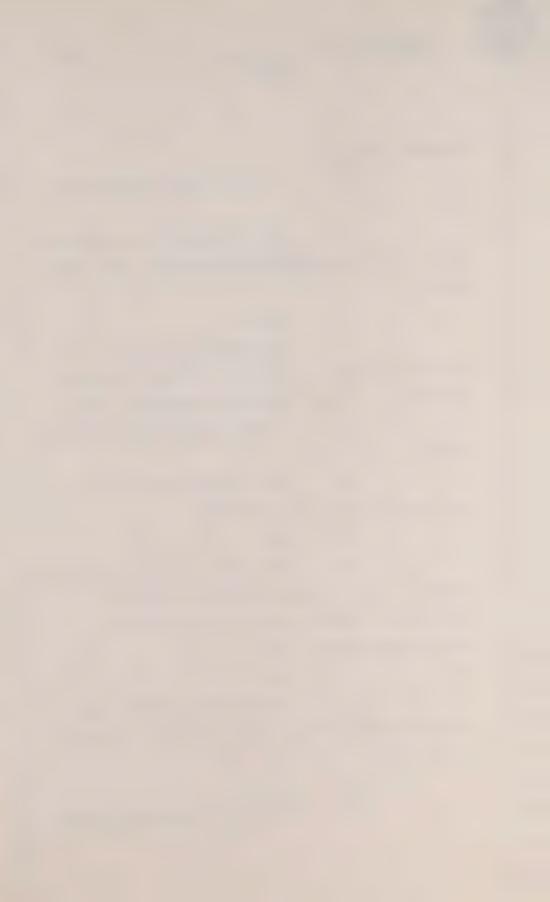
All right. Now, from the time of the blue spell Justin Cook was placed on constant care nursing and you were assigned to provide that constant care?

> A. Yes.

Q. And that was getting close to the end of the shift, you didn't have to do that for very long?

> No. Α.

How was the baby when you went 0.



(Lamek)



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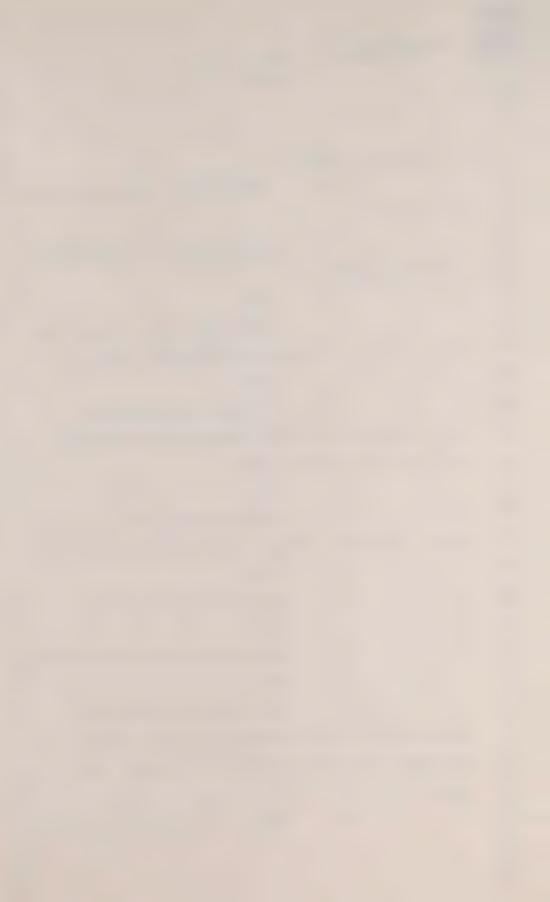
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night?

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1 2 9 off shift that night? 3 A. His condition was improved and he settled. 4 0. His condition was improved and 5 he had settled? 6 . A. Yes. my All right. At the end of the Q. 8 shift you were relieved by Miss Nelles I believe? 9 Yes. And she was assigned to 10 provide constant care for Cook for the long night 11 shift that was then started? 12 Yes. A. 13 Q. Did you report to her upon the 14 child's condition when she came on and you went off? 15 Α. Yes. 16 You then went off shift? 0. Α. Yes. 17 Did you then leave the Hospital? 0. 18 Yes. A. 19 Q. When you came on duty for 20 the long day shift on Sunday, March 22nd, did you 21 then learn that Justin Cook had died during the

A. Yes.





Scott, dr.ex. (Lamek)

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	2		Q.	Who told you?
	3		A.	The night staff.
	4		Q.	You don't remember who in
	5	particular?		
	6		A.	Either Susan or Phyllis, I
		don't know.		
	7		Q.	What was your reaction to that
	8	news?		
	9		A.	Well, I was rather surprised
1	0	he had died but	t at the	same time I wasn't surprised.
1	1		Q.	Because he was a sick child
1	2	I take it?		
	7		A.	Yes, yes.
	3		Q.	What then caused you any
1	4	measure or sur	prise?	
1	5		A.	Well, I didn't really expect -
1	6	I mean, he had	blue spe	ells before he came to the
1	7	Hospital and ap	part from	n the blue spell he wasn't that
1	8	sick that day.		
1	9		Q.	All right. Did you learn
		at some time or	n Sunday,	, March 22nd that post mortem
	0	blood samples h	nad been	drawn from Justin Cook?
2	1		A.	I don't recall.
2	2		Q.	You don't recall anyone telling
2	3	you that?		
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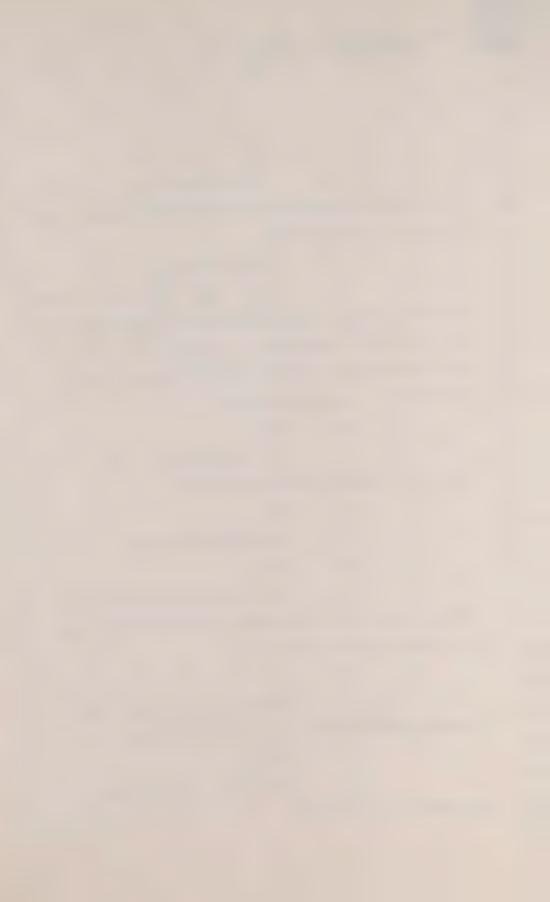


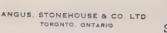


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- Q. Did you ever learn that post mortem blood samples had been drawn from Justin Cook shortly after his death?
 - A. I can't be sure.
- Q. Okay. Now, there were a number of things however that you did learn when you came on duty on Sunday, March 22nd. You learned I take it that the digoxin had been locked up and was now being treated as a controlled drug?
 - A. Yes.
- Q. You learned that. You learned there were supervisors on the floor?
 - A. Yes.
 - Q. Throughout the day?
 - A. Yes.
- Q. You learned that it was the supervisor not the team leader who now had the keys to the medications' cupboard?
 - A. Yes.
- Q. Indeed, the supervisor was checking drug dosages before administration?
 - A. Yes.
- Q. All right. What was your reaction to all of that?





Scott, dr.ex. (Lamek)

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I was rather confused. A. didn't know what was happening and nobody gave me the right answer, nobody knew what was going on.

- 0. Whom did you ask?
- Marie Mandal because she was a team leader, I thought she might know a lot more than I did.
 - Q. Yes.
 - And she didn't know. Α.
- Q. Did you ask anyone else what was going on and what was the explanation for all of this?
 - A. No. ·
 - 0. Did you ask the supervisor?
- A. Well, she just said that she has to do what she is told and it is for our own protection.
- And were the nurses on the Q. floor discussing amongst themselves what could be going on here, wondering why all these things had happened?
- A. We did wonder why because when I learned that digoxin was already locked up before it was supposed to be locked up before Justin Cook died, I thought maybe, you know, I was surprised



because I thought this had to do with Justin and Justin was not on digoxin.

Q. Yes.

A. But then I later learned that it was already locked up before Justin Cook died, so, it couldn't have anything to do with Justin Cook.

Q. It wasn't his death that caused all these things you thought?

A. No.

Q. All right. Well, let's look at that particular feature of it. Were you concerned that the digoxin was now locked up?

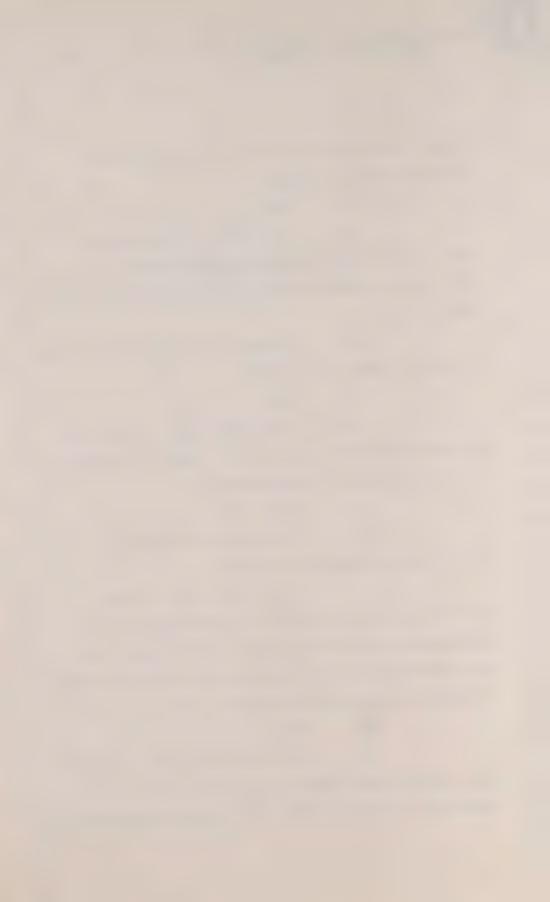
A. Yes, I was.

Q. Did anything cross your mind as an explanation for that?

A. Well, there were so many explanations from different people and one of the explanations was that maybe the manufacturers had made a mistake in the concentration and maybe it was stronger than what it was supposed to be on the label

Q. Yes.

A. And I was under the impression that they actually took it off from the ward to be tested and I thought they brought other new bottles;





that's what I thought at the time.

Q. Okay. Now, that might have explained to you why the digoxin was locked up but it wouldn't have explained the presence of supervisors on the ward, would it?

A. No.

Q. What explanation did you come to for their presence, if any?

A. Well, they kept saying it was for our own protection, so, I thought maybe some of the nurses had made a mistake or gave a double dose or something like that.

Q. Well, did it not occur to you that for some reason that you could not identify the nurses on the fourth floor were having a very close eye kept on them?

A. Well, we didn't like to think about that.

Q. No, but it was pretty obvious was it not. You got supervisors there and they've got the keys to the cupboard and they are checking your dosages, it was pretty clear wasn't it that they were keeping a pretty close eye on the nurses on the floor?

A. Yes.



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		Q.	And	that	must	have	been	very
troubling	to	you?						
		Α.	Yes					

Q. . And no one would tell you

why?

learned it.

time?

Pacsai?

A. No.

Q. Did you learn at some point, Mrs. Scott, that Baby Pacsai had died with a high digoxin level?

> A. I'm not quite sure when I

Q. But you did learn that at some

A. Yes.

Q. And did you learn that an Inquest was probably going to be held on Kevin

A. I think I heard something about that at the meeting at Liz' house but I'm. not quite sure.

Q. At Mrs. Radojewski's house on the Monday night?

> A. Yes.

You have no recollection of hearing about either of those things prior to the



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Monday night, the 23rd, either of those things being the high digoxin level in Pacsai and the probability of an inquest?

A. I might have but I don't recall.

Q. All right. When you did learn that Kevin Pacsai had died with a high digoxin level and that an inquest was probably going to be held, what was your reaction to that?

A. Well, at a meeting when we learned that the Coroner had been called in and Susan Nelles was the one that was involved, so, we thought she might be in some sort of trouble, maybe she had given a double dose or something like that, that's what we thought.

Q. You are talking now about the meeting on the Monday night?

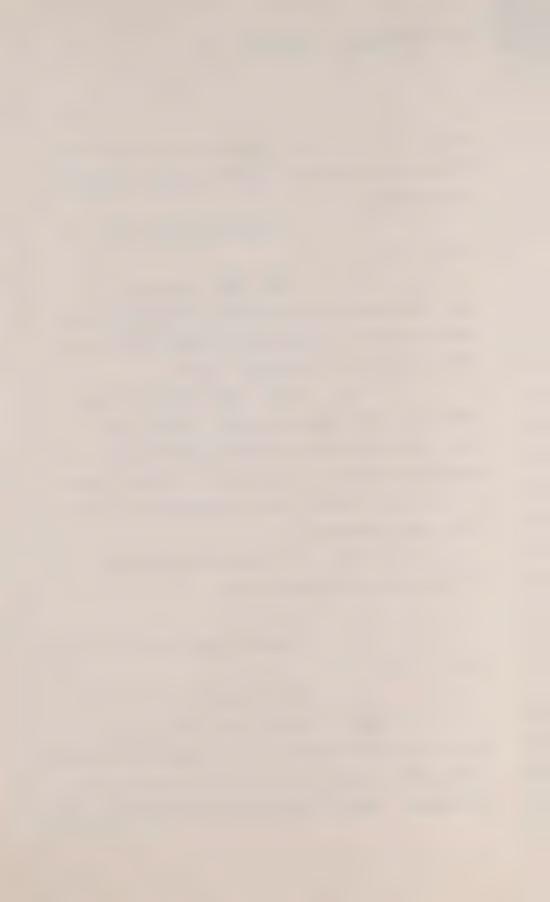
A. Yes.

Q. What was your reaction to all,

that?

A. My reaction?

Q. Yes. Did it occur to you then on the Monday night when you learned those things, as you think you did, did it occur to you then that information, coupled with what you had learned on the



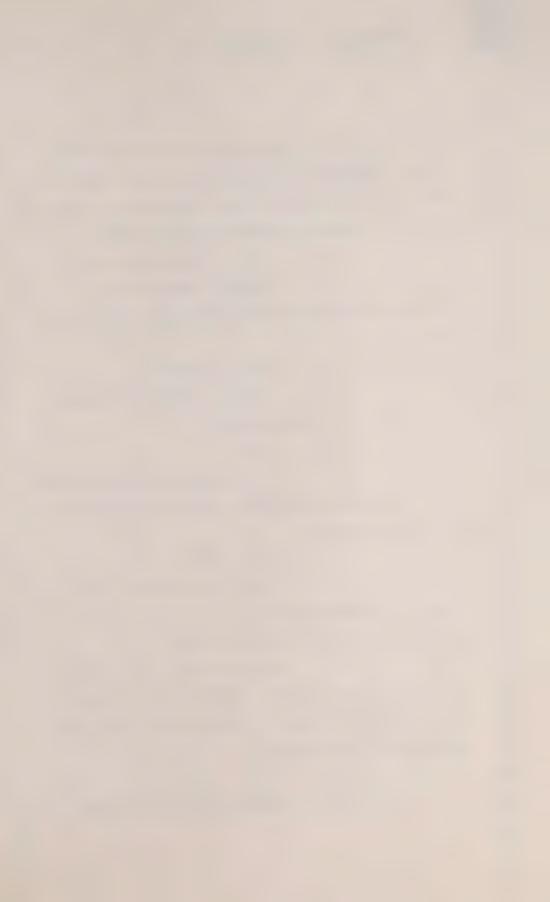
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Sunday, that is to say the digoxin was now locked up and supervisors were watching you all, did it occur to you then that digoxin may have had something to do with some of the deaths on the floor?

- A. To a certain extent, yes.
- Q. Did you think of any particular deaths in which digoxin might have been involved?
 - A. No, just general.
- Q. Did you express that thought to anybody on the Monday night?
 - A. No.
- Q. Was there any discussion along that line among other people that you overheard on the Monday night?
 - A. About what?
- Q. Well, did you hear anyone wondering whether digoxin may have been involved in the deaths of some of these children?
- A. Well, we must have discussed it at some point because I remember Susan saying that she was very positive that she had given the right dose to Baby Pacsai.
 - Q. Yes.
 - A. Because she says that she





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remembers seeing the plunger in the syringe where the digoxin was drawn up, it didn't come all the way out.

Q. All right. Meaning that I take it that she had a less than full syringe, a small dose?

A. Yes.

Q. And she was satisfied that the dose that she had administered to Baby Pacsai was the correct one?

A. Yes.

Q. All right. But then did you hear any talk or did you discuss with anybody at the meeting on Monday night at Mrs. Radojewski's house the possibility that digoxin may have been involved in the deaths other than Baby Pacsai's?

A. I think, I don't know who mentioned it, but I think we mentioned about Allana Miller.

Q. Allana Miller?

A. Allana Miller and Justin

Cook, but whether we - I didn't ask whether there

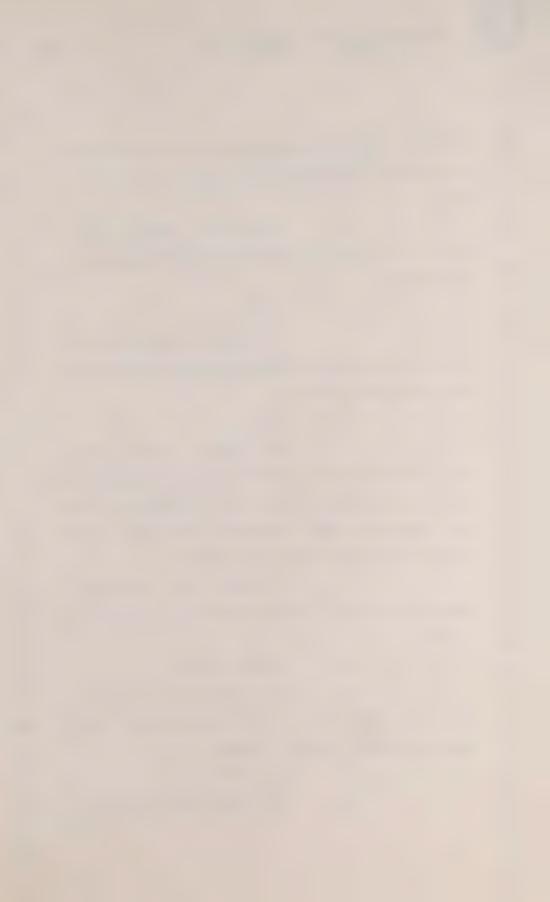
were any digoxin levels in there.

Q. All right.

A. But Mary Costello and Liz

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wouldn't say anything.

- Q. They wouldn't say anything?
- A. They wouldn't say anything.

They said the only thing we can tell you is that the Coroner has been called in regarding Baby Pacsai.

Q. All right. I take it from what you have said that you did not know even at the meeting on Monday night that Baby Miller had had a high digoxin level when she died?

- A. No, I didn't.
- Q. And you didn't know then that Baby Cook had had a high digoxin level when he died?
 - A. Not at that time.
 - Q. You subsequently learned

that, those things, about Miller and Cook?

- A. Yes, when Susan was arrested.
- Q. Not before then?
- A. No.
- Q. As far as the meeting at

Mrs. Radojewski's house was concerned on the Monday evening, how did you learn about that meeting, who invited you?

- A. She rang me up.
- Q. Who did?
- A. Liz.





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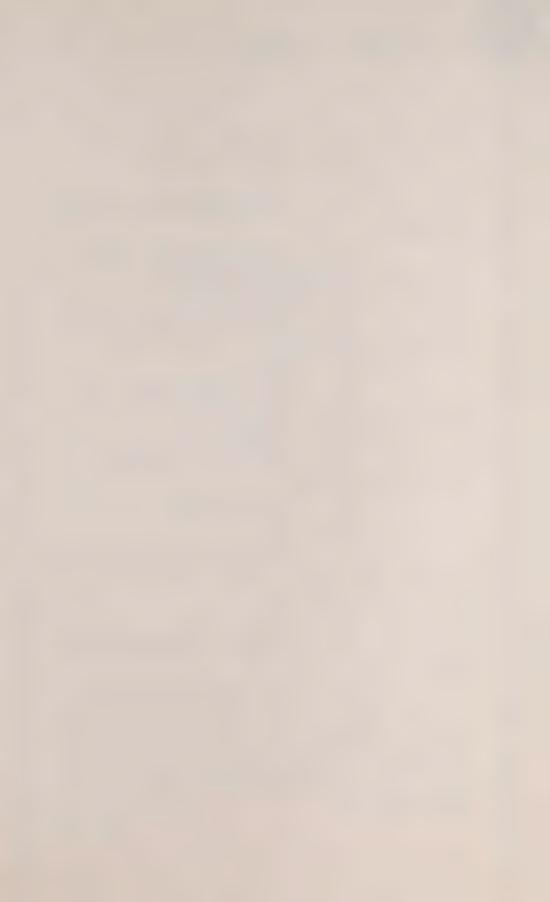
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work?

Monday I take it?

Q. Mrs. Radojewski? A. Yes. Called you up during the day Q. A. I don't know what time she called me but she called me at home. All right. And she invited Q. you to go to the meeting? A. Yes. Did she tell you what the Q. meeting was going to be about? She said we are going to A. discuss recent events. Q. Recent events? Α. Yes. All right. You hadn't worked Q. on Monday, March 23rd? Α. No. You had not been scheduled to Q. It was my regular day off. A. Yes. You had worked the day 0.1 on Sunday, you had gone off duty at 7, 7:30 Sunday

evening and you had not been in the Hospital on the



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A. Yes.

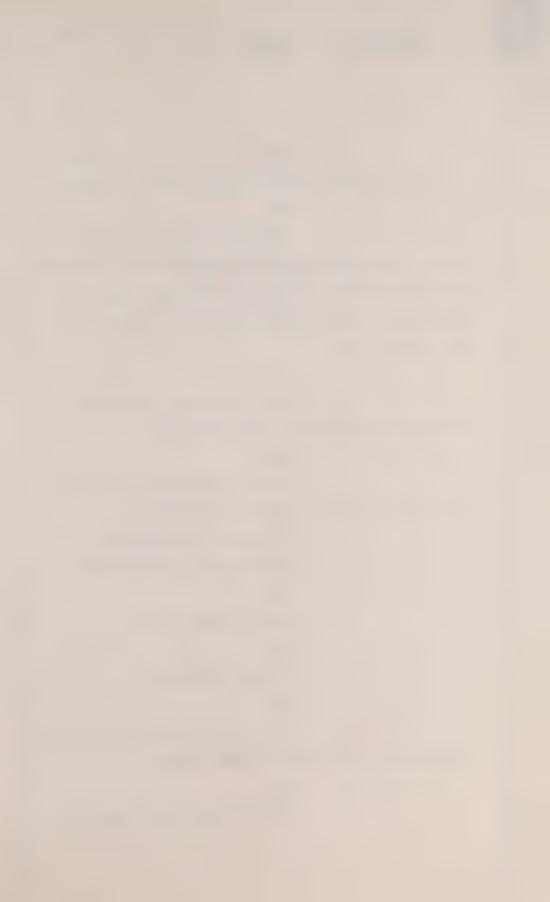
Q. And you were called at home and invited to this meeting at Liz Radojewski's house that night?

> A. Yes.



TORONTO, ONTARIO DM.jc FF 1 2 0. 3 4 A. No. 5 6 7 8 team, wasn't it? 9 Yes. 10 11 A. Yes. 12 13 14 A. 15 0. 16 A. Yes. 17 0. Yes. 18 A. Q. 19 A. Yes. 20 Q. 21 of being told that on the Monday night? 22 A. No. 23 Q. Was any explanation given to 24

Indeed you were not scheduled to work on Tuesday, March the 24th either, were you? After your long day shift on Sunday, March 22nd the next scheduled shift that you had was to be the long day on Wednesday, March the 25th, that was your regular team, Mrs. Trayner's Were you told at some point not to report for duty on the Wednesday? Do you recall when and by whom you were told not to come in on Wednesday? I think at the meeting. You think at the meeting? On the Monday night? By Mrs. Radojewski? Do you have a clear recollection

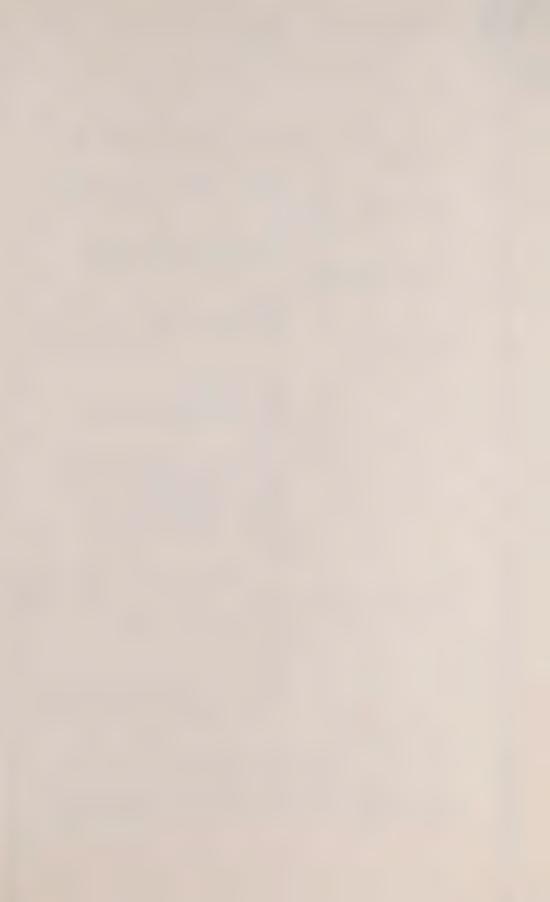




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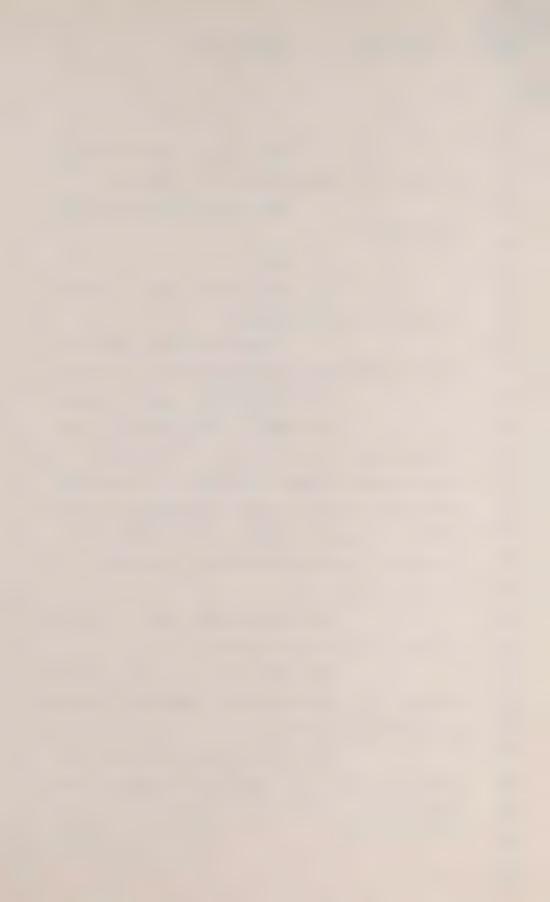
FF.2 1 2 you as to why you should not come in to work on 3 Wednesday? 4 Well, all she said was we were Α. under too much stress. 5 0. Did you have any trouble 6 agreeing with that? 7 A. Yes. 8 0. 9 too much stress? 10 A. Yes, I was. 11 0. Yes. A. 12 Q. 13 A. 14 Q. 15 A. Yes. 16 17 18 A. About 7:30. 19 Q. 20 Α. 21 10:30. 22 Q. 23

You didn't think you were under You did agree with her? When did you return to duty? The following Monday. Which would be the 30th? Let's just go back to the Monday evening meeting for a moment, please, if we may. What time did you get to Mrs. Radojewski's house? And you stayed until what time? I didn't stay very long, about Was the meeting already in progress when you arrived, were there people already there talking?





7.0	(Lamer)
FF.3	-
:	A. Yes, but we were waiting for
•	the girls who were working on the long day.
•	Q. The day shift girls had not
	arrived yet?
(A. Yes.
	Q. And can you give me your best
	recollection of who was there?
	A. Susan was there, Phyllis was
9	there, I think Shelly McCord was there, I don't know -
(2) 10	THE COMMISSIONER: Yes, Mr. Brown?
11	MR. BROWN: I don't want to be an
12	obstructionist, but we did have a ruling about a week
13	ago in terms of Phase I and Phase II. I certainly
14	understand that part of the meeting may be relevant
15	to Phase I, but I am having a bit of difficulty in
	seeing what is relevant to Phase I and what is
.16	relevant to Phase II.
17	THE COMMISSIONER: Well, it is pretty
18	innocent so far I think, isn't it?
19	MR. BROWN: It is, I just wanted to
20	be clear that that distinction remains and is in force
21	and applies to counsel.
22	THE COMMISSIONER: It is, and it
23	remains in force. Mr. Lamek has heard you, I don't
24	know what
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MR. LAMEK: I will try not to --

THE COMMISSIONER: Transgress?

MR. LAMEK: Transgress.

THE COMMISSIONER: Well, I don't mind innocent transgression, but the trouble is they are not always innocent, they start off innocent but they get awfully guilty before I know what has happened.

MR. LAMEK: You know I wouldn't do that, Mr. Commissioner.

Q. What do you recall of the discussion at the meeting on the Monday night? What topics were discussed first of all, that you can remember and that were discussed in your hearing?

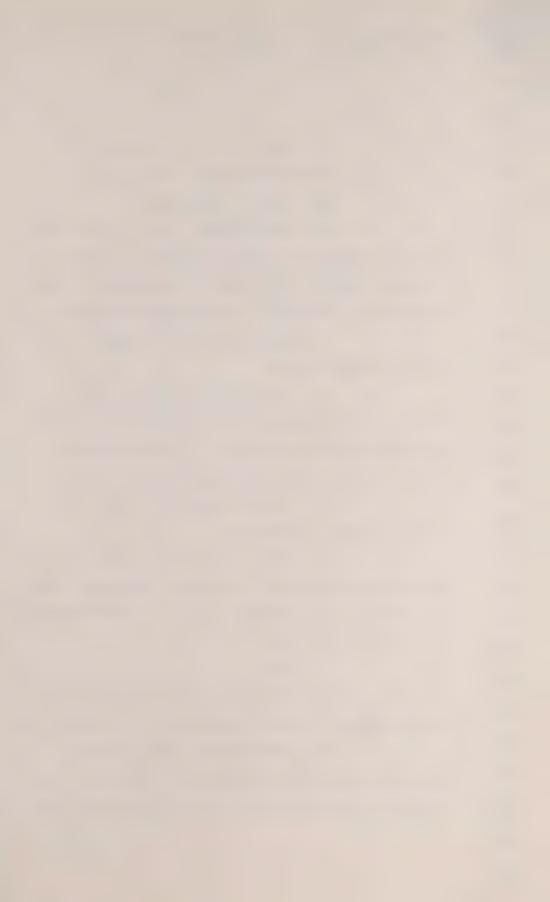
A. Other than what I have just told you I couldn't remember.

Q. What you have just told me was that there was mention of the Pacsai situation, and Susan Nelles saying she was sure she had administered the right amount of drug.

A. Yes.

Q. I can't recall that you really told me anything else that happened on the Monday night

THE COMMISSIONER: While we are talking about Mr. Brown's objection I think it would be important, you know more about this naturally than



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I do, that may not always be the case but it is right now, and if there is some way we can avoid - is there any way we can avoid that by asking Mrs. Scott to come back in Phase II? Is there anything --

MR. LAMEK: I don't know that going further or stopping short of the Monday evening meeting is going to have any bearing on that, Mr. Commissioner. I think if Mrs. Scott is required to come back in Phase II it is with respect to subsequent conversations.

THE COMMISSIONER: If she is, if it can be avoided by one or two relatively innocent questions I would be all for it and I am sure

Mr. Brown would be too, but I don't know, you know more than I do.

MR. LAMEK: I think at this stage,
Mr. Commissioner, I am inclined not to stray and to
avoid a reappearance of Mrs. Scott.

THE COMMISSIONER: All right.

MR. LAMEK: I think there are matters subsequent in time to March 23rd about which we may need to hear from her again rather than properly hear from her now.

Q. Let's move on from that meeting,
Mrs. Scott. There is just one other area that I really



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want to get into with you and I think we can do it before the end of the day. We have heard here of an incident involving you in the late summer of 1981, an incident involving salad and some pills and that sort of thing. Do you know the incident to which I refer?

A. Yes.

Q. Can you give me your best recollection on when that incident occurred?

A. The first call?

Q. I am thinking for the moment about the incident of the salad and the pills and the soup and that particular incident, I would like to work backwards or forwards from that point if we can fix it.

A. Some time in August.

Q. Some time in August?

A. The end of August and beginning

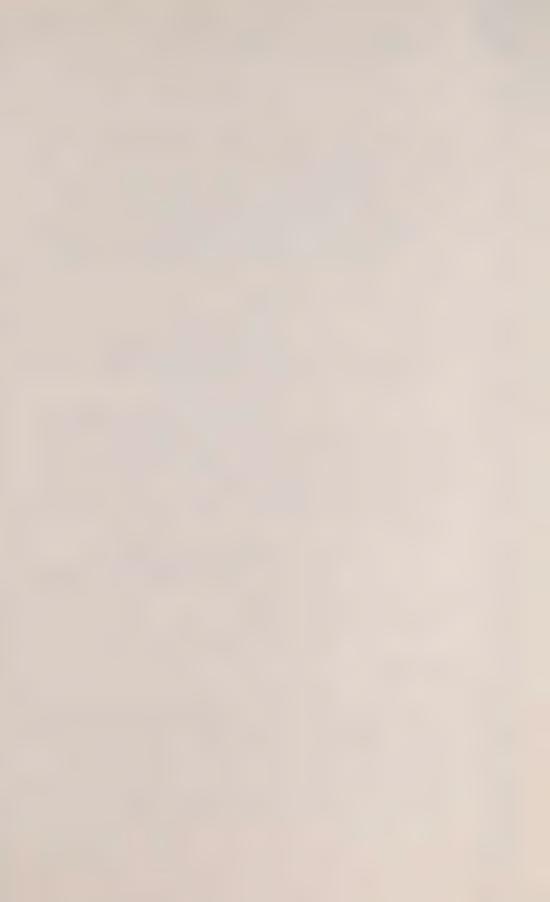
of September, I don't know.

Q. You can't be any more precise

A. No.

Q. You asked me a question a moment ago about calls. Did you receive telephone calls at about that time?

A. Not me but my kids.



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calls?

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Q. Your children received telephone

A. Yes.

Q. Was it in some way related to the events of the nine months in which we are interested?

Scott, dr.ex.

(Lamek)

A. Yes.

Q. And to the deaths of the children in whom we are interested?

A. Yes.

Q. What is your information as to when - how many calls were there, as you understand it?

A. Two and then later on I learned there was three.

Q. You thought two and later on you learned there was a third?

A. Yes.

Q. Were these all prior to the pill in the salad incident?

> I'm not quite sure. A.

Q. Was any of them prior to the pills in the salad incident?

A. I don't think so.

Q. You think the phone calls came after the incident of the salad?





THE COMMISSIONER: Just a moment.

Yes, Mr. Rosenberg?

MR. ROSENBERG: Mr. Commissioner, I think perhaps the witness is just a little confused, and we know the dates, so if Mr. Lamek wants to lead.

MR. LAMEK: I only have the one.

MR. ROSENBERG: Oh, I have them all

here.

THE COMMISSIONER: They are all in the preliminary, the list, that is 32A, is it, 32B?

MR. ROSENBERG: I am looking at this,

all I am suggesting is --

THE COMMISSIONER: The problem about that is we have just accepted that and I don't know that it matters, it probably doesn't make a great deal of difference. But if that is a fact, I agree with Mr. Rosenberg, nobody is disputing the dates and it probably would be easier just to assume it.

MR. LAMEK: It would except unhappily Mr. Commissioner, I know that Mrs. Scott has no independent recollection of two of the three dates, and I really don't think I can properly lead her with a suggestion as to a date on which she has no particular recollection.

THE COMMISSIONER: Well, can I ask



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this. Is it going to make any real difference whether --

MR. LAMEK: Probably not, no, probably

THE COMMISSIONER: Then I suggest we put it, we assume for the moment until we hear to the contrary that the date set forth in Tab 76 of 32B are correct.

MR. LAMEK: Thank you, sir.

THE COMMISSIONER: All right.

MR. LAMEK: Q. Mrs. Scott, it is our understanding then from other sources, that after about the middle of June of 1981 there were certain calls made to you at your house in which when you picked up the telephone nothing was said or heard, is that fair?

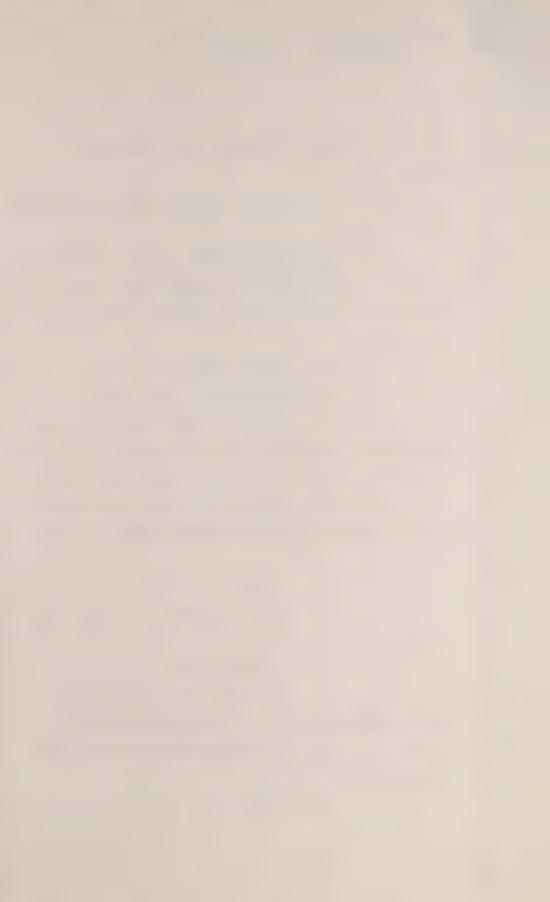
> A. Yes.

Q. How many such calls were there, do you know?

About three.

And then about the third or fourth week of August it is your understanding, I believe, that your children received you thought two telephone calls?

> A. Yes.





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			Q.	Wł	nat i	s yo	our inf	formation	as
to	what	if	anything	was	said	in	those	telephone	calls:
			_						

A. Well, they were all the same "Baby killers Trayner and Scott must die".

Q. "Baby killers Trayner and Scott must die", your children reported to you receiving those calls?

A. Yes.

Q. What was your reaction to that?

A. The first time I was working on days and my son rang me up and he said Mom, be careful, someone is going to kill you. So you know, I didn't know what to think.

Q. Yes.

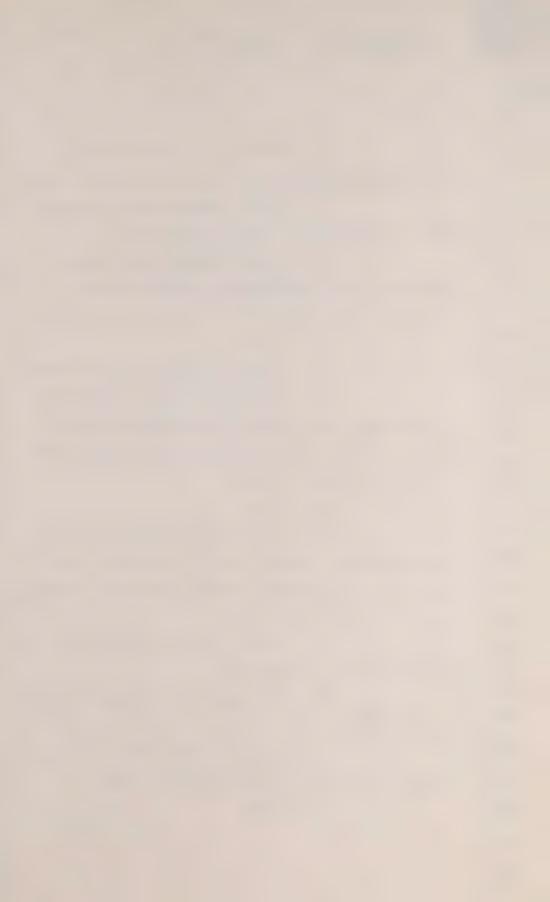
A. And I told Phyllis, she was the team leader, and she told the supervisor and I don't know what happened, whether the police came or not, I can't recall.

Q. Yes. Did you do that same thing after the second call?

A. The second call, yes, I did the same thing.

Q. Were you concerned by the messages that your children relayed to you?

A. Yes.



TORONTO, ONTARIO

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		(Σ.	Other	than	reg	port	ing it	to
Mrs.	Trayner	did	you	report	them	to	or	discuss	them
with	anybody	else	e?						

Some of the girls, all the girls working that day.

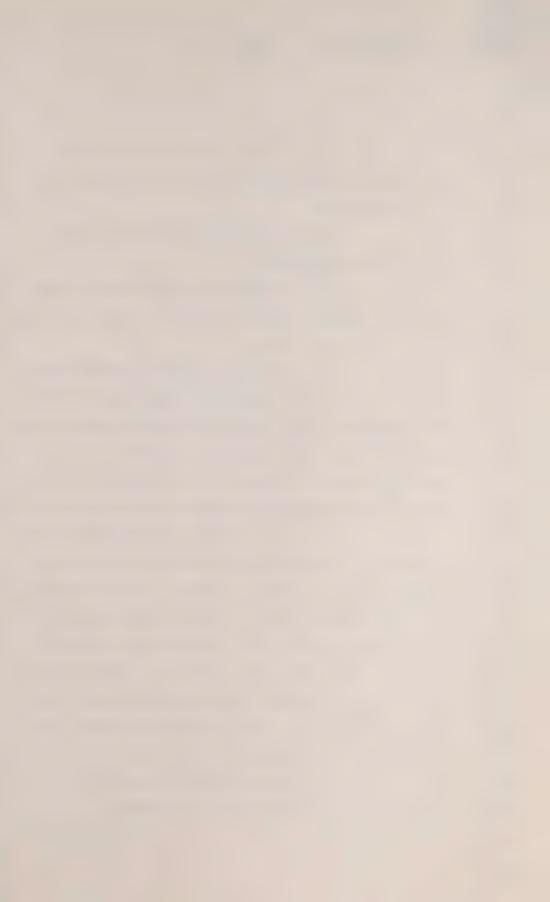
You are not sure whether those calls were received before or after the salad incident?

> A. No.

Give me your best recollection please of what I call the pills in the salad incident, what happened at that time from the first moment when you went out to lunch until you wound up at the hospital across the street. Can you tell me in your own words what happened according to your recollection?

To the best of my recollection I remember sitting down and I was just going to eat my salad and Phyllis came in and sat beside me on my left. She had soup and she wasn't eating the soup. So afterwards she said if you like it you can have some of my soup. She had a spoon so I took a spoon and stirred it, I didn't stir very well, just to see what was it and I saw some noodles and chicken, so I took one or two teaspoonsful and I didn't like it.

THE COMMISSIONER: I am sorry, you will have to speak louder, what was that?



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refrigerator?

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THE WITNESS: I took one or two teaspoons of the soup.

THE COMMISSIONER: Of her soup?

THE WITNESS: Yes. And I told her as much as I was hungry I am not that hungry to have cold chicken soup.

THE COMMISSIONER: I am sorry, why were you stirring her soup?

THE WITNESS: Because I didn't know what it was.

MR.LAMEK: I think Mrs. Scott has said Mrs. Trayner had invited her to have some of it.

THE COMMISSIONER: Oh, I see.

MR. LAMEK: Q. Can we go back a minute, Mrs. Scott, on this. You had brought lunch from home that night?

A. Yes.

Q. And you had put it in the

A. Yes.

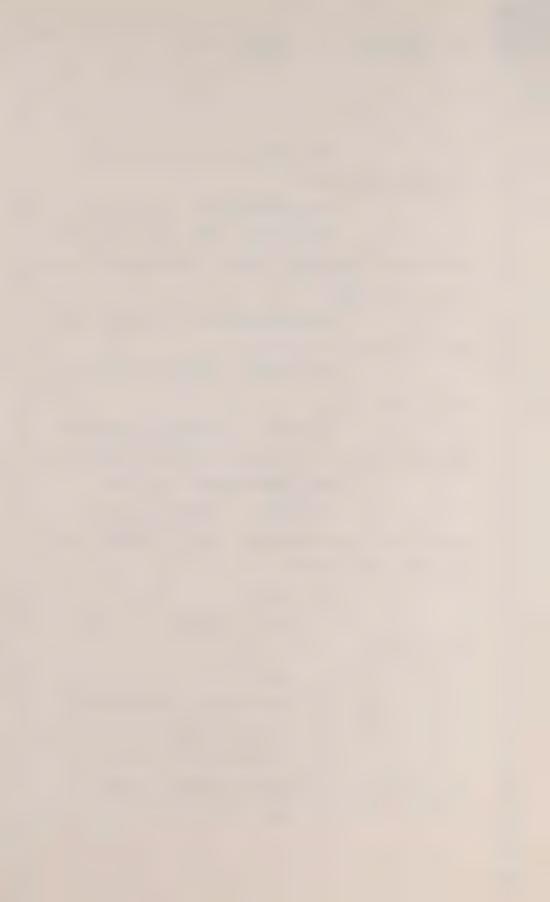
Q. Had you just brought salad?

A. I brought some sandwiches too.

Q. You had salad and sandwiches.

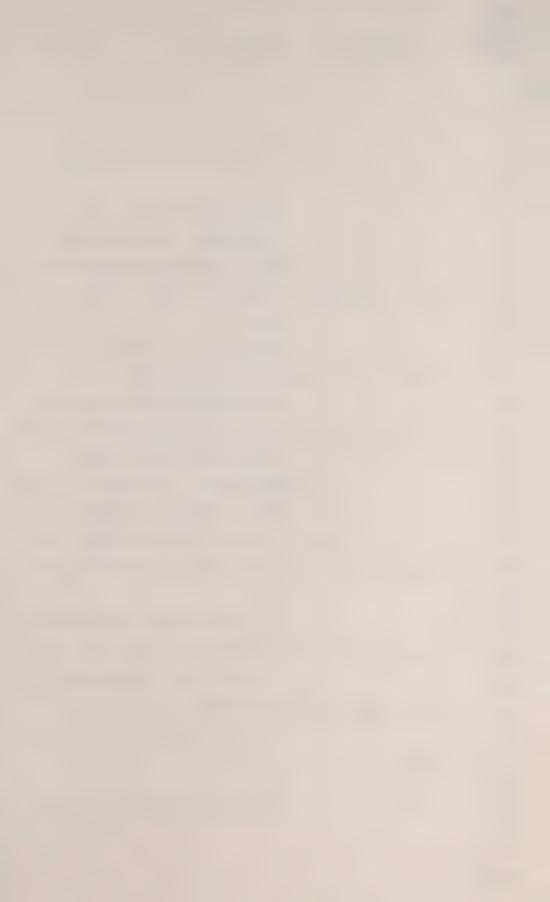
The salad was in a plastic container, I guess?

A. Yes.

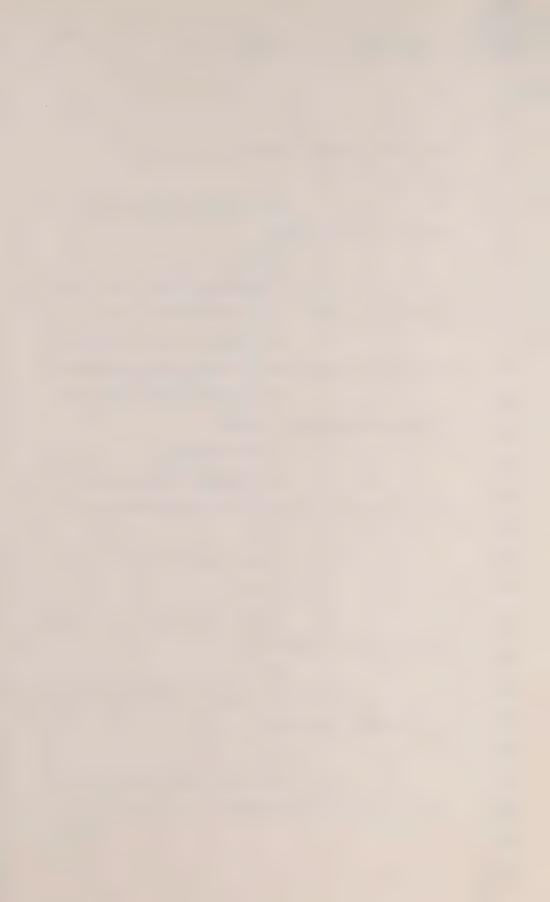




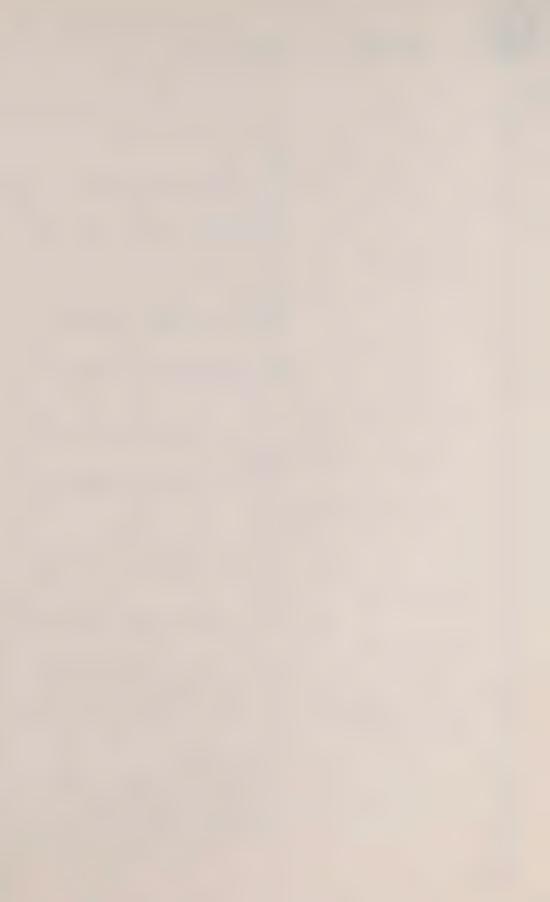
FF.13	n.	
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2	Q.	Did you have salad dressing?
3	A.	No.
4	Q.	None at all?
5	A.	No, I brought that separately.
6	Q.	Okay, the salad dressing you
	brought separately in	another container I take it?
7	A.	Yes.
8	Q.	What kind of dressing was it
9	as a matter of interes	st, do you remember?
10	Α.	Most probably Italian dressing
11	or cucumber dressing,	that is the only dressing I take
12	Q.	Okay, that is fair enough.
13	THE CO	OMMISSIONER: I am sorry, Italian
14	MR. L	AMEK: Italian or cucumber.
	Q.	It wasn't Russian though. So
15	you went to the refrig	gerator and you got your lunch?
16	A.	Yes.
17	Q.	Did you take out the salad and
18	the dressing and the	sandwiches all at the same time?
19	Α.	I didn't take the sandwiches,
20	just the salad and the	e dressing.
21	Q.	You took the salad and the
	dressing?	
22	A.	Yes.
23	Q.	Did you go to the table at the
24		



A E M	TORONTO, ONTARIO (Lamek)
FF.14	
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2	back of the nursing station?
3	A. Yes.
4	Q. And you sat down and you were
5	going to eat your salad?
6	A. Yes.
7	Q. At that time was Mrs. Trayner
8	present at the back of the nursing station?
	A. She came, I was sitting down
9	and eating my salad and she came and sat beside me.
10	Q. Was anybody else there when
11	you sat down with your salad?
12	A. I don't recall.
13	Q. You opened up the container of
14	salad and what did you do, put the dressing on it?
15	A. Yes.
	Q. Did you mix it up?
16	A. Yes.
17	Q. Did you see anything in your
18	salad when you mixed it up?
19	A. No.
20	Q. It appeared to be salad as you
21	had brought it from home?
22	A. Yes.
	Q And then you began to eat the
23	salad, and Mrs. Trayner came?
24	
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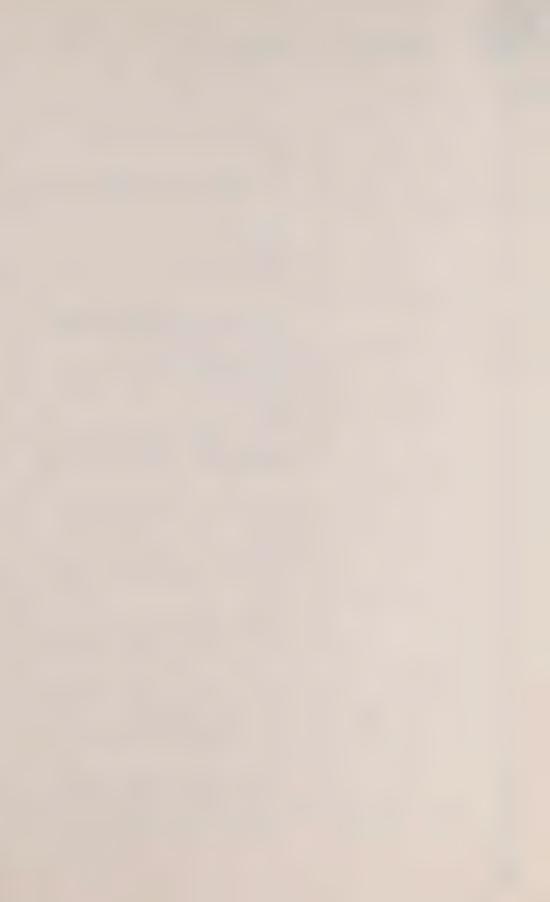
* м в	•	(James)
FF.15	_	
2	А.	Yes.
3	Ω.	And sat down beside you?
4	A.	Yes.
5	Q.	Did she have her soup with her
6	at that time?	
7	A.	Yes.
8	Q.	Again in a plastic container?
	A.	Yes.
9	Q.	And she sat down and did she
10	begin to eat her sou	p?
11		I don't know whether she ate her
12	soup or not, I don't	recall.
13		And she invited you to have some
14	of her soup, did she	
15	Α.	Yes.
16	Q.	Did you offer to trade her some
17	salad for it?	Van Taria
	A. of my salad.	Yes. I said you can have some
18	Q.	Okay. Then you picked up the
19		Mrs. Trayner's soup to see what
20	was in it?	The started a soup to see what
21	A.	Not too much.
22	Q.	And what did you see in it?
23	A.	Some chicken and noodles.
24	Q.	You didn't see any pills in it?



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FF.16	
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3	A. No.
	100 tried the soup and it was
4	cold, you say?
5	A. Yes.
6	
7	cold soup for lunch?
8	A: She mentioned something about
. 9	the microwave not working, or something.
	THE COMMISSIONER: Do you have a
10	microwave at the Hospital?
11	THE WITNESS: Yes, two of them.
12	THE COMMISSIONER: I see. Were they
13	on the floor?
14	THE WITNESS: No, on the service
15	floor and on the main floor.
	MR. LAMEK: Q. Which floor is the
16	service floor, Mrs. Scott?
17	A. I don't know.
18	Q Is it down or up from the 4th
19	floor?
20	A. The main floor.
21	Q. It is below the main floor?
22	A. Yes.
	Q. So you have at least got to go
23	down to the main floor and maybe to the service floor

down to the main floor and maybe to the service floor

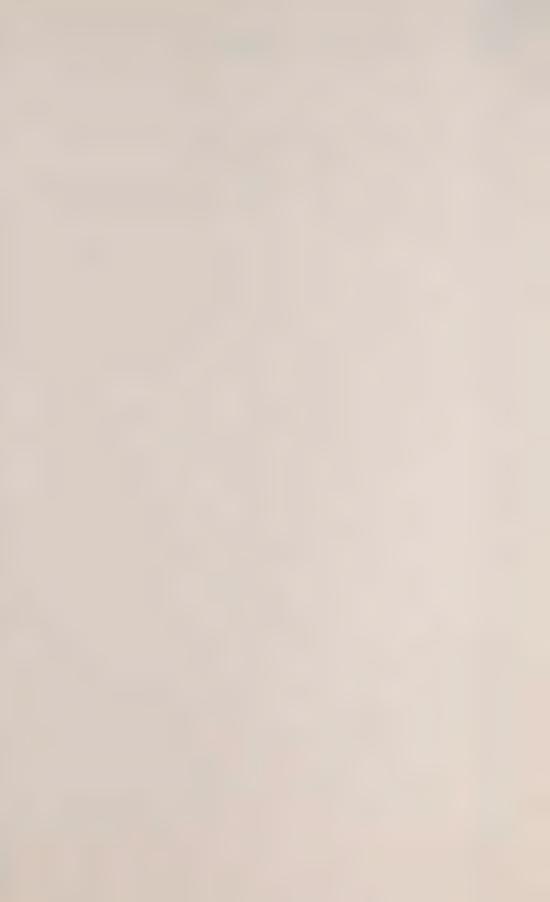


to get in to the microwave ovens?

A. Yes.

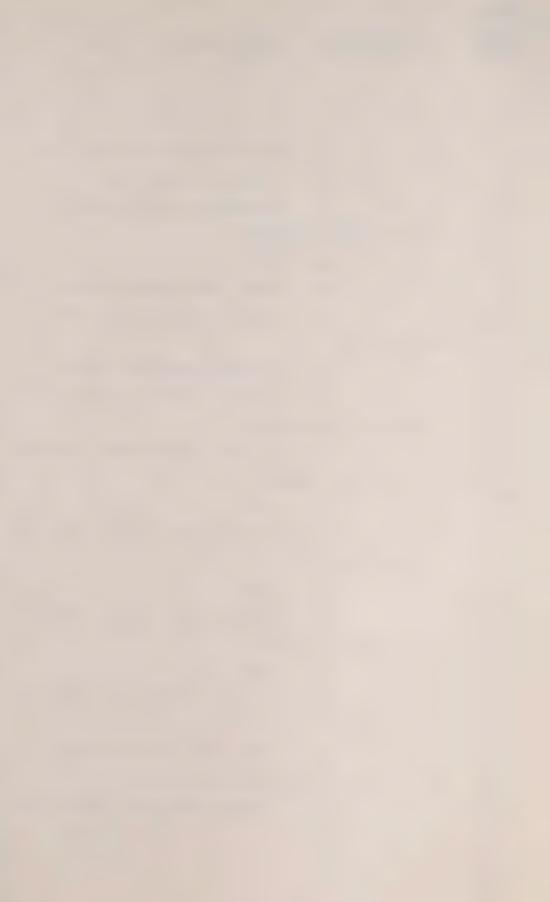
Q. And she said the microwave

wasn't working?



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GG/EMT/ko	2		Q.	And hence her soup wasn't hot?
	3		Α.	That is what she said.
	4		Q.	You didn't like the idea of
	5	cold chicken s	soup you	say?
1	6		Α.	No.
l .			Q.	Okay. What happened then?
i	7		Α.	Then the doctor came. I was
	8	expecting him.		
	9		Q.	What did the doctor come for?
li .	10		Α.	To start an IV, intravenous on
	11	a baby that I	was loo	king
K	12		Q.	You were looking after a patier
	13	an IV had to b	e start	ed?
I)			Α.	Yes.
	14		Q.	And you called for the doctor t
	15	come to do tha	t?	
1	16		Α.	Yes.
1	17		Q.	And of course he came while you
1	.8	were having yo	ur lunch	1?
1	.9		Α.	Yes.
2	20		Q	Did you go off to help with tha
	1	job?		
			Α.	Yes. When I saw him coming I
	22	got up and lef	t the nu	rsing station.
2	13		Q.	Did you leave your salad on the
2	4			

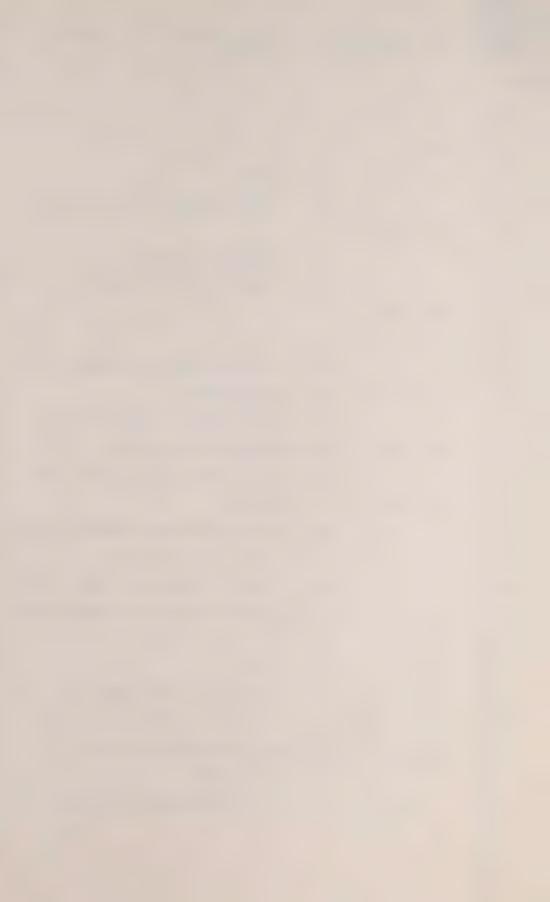
soup wasn't hot? he said. e the idea of ppened then? came. I was octor come for? intravenous on ng after a patient, for the doctor to e came while you to help with that w him coming I



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GG 2 2	table?	
3	Α.	Yes.
4	Q.	Who was there when you left do
5	you remember?	
6	Α.	Phyllis was there.
7	Q.	Do you remember anybody else
	was there?	
8	A.	No.
9	Q.	Did you cover up the salad or
10	did you just leave it	as it was?
11	Α.	No, I left it as it was and I
12	told her she could ha	ave some if she liked.
13	Q.	All right. You told her she
14	could have some if sh	e liked.
	How lo	ng were you away with the doctor?
15	Α.	About 10, 15 minutes.
16	Q.,	Ten or 15 minutes. Okay. Then
17	did you go back to th	e nursing station to finish your
18	lunch?	
19	Α.	No.
20	Q.	.What did you do then?
21	Α.	While I was still - while the
	doctor and I were sti	ll looking for a vein
22	Q.	All right.
23	Α.	on the baby, one of the



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TORONTO, ONTARIO

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nurses came into the room and she said you have to go out, you know, there is something terrible happening outside. You have to go out.

Do you recall who it was who came Q. into the room to say that to you?

> A. Mary Lynne Barnett.

0. Lynne Barnett?

A. Yes. She was the one who replaced Susan Nelles.

> Q. All right.

A. On the team.

0. Lynne Barnett came in and said you have got to go outside there is something terrible happening?

> A. Yes.

0. All right.

So she took over. A.

Q. Did you ask her what it was?

A. She wouldn't tell me. She was quite agitated. She say you just go out.

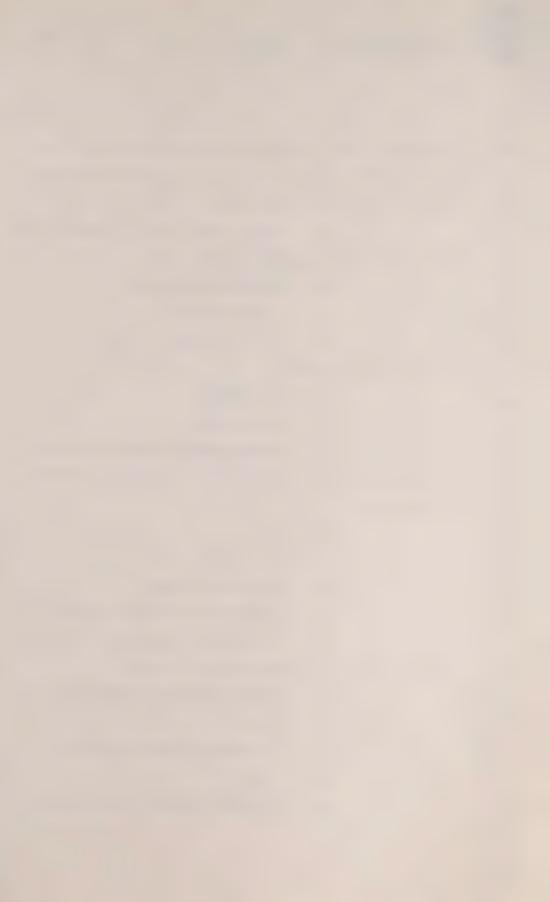
> Q. Did she stay with the doctor --

Α. Yes.

-- when you went out then? Q.

Α. Yes.

0. And then you went out in fact to



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the nursing statio	on?	
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ANGUS, STONEHOUSE & CO. LTD

- Α. Yes.
- 0. What did you find then?
- Α. Well, Phyllis was crying.

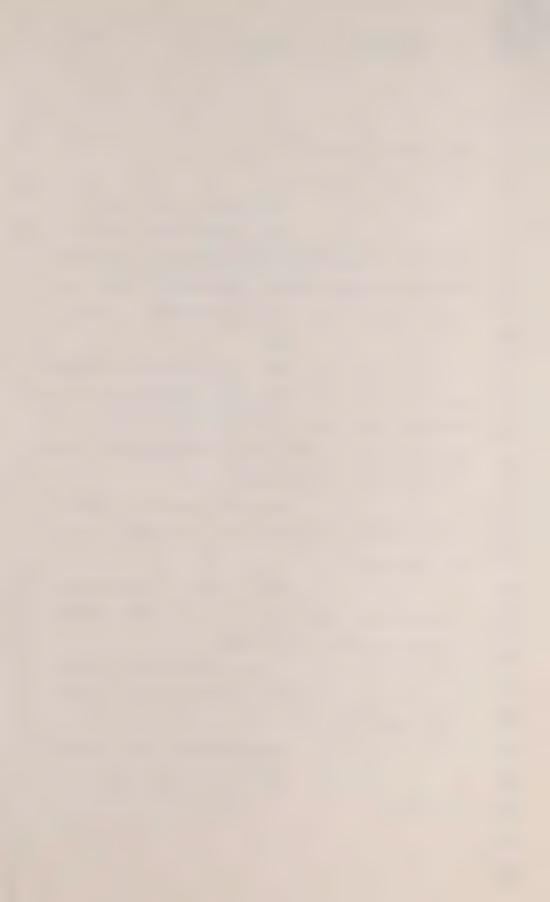
Sitting down there and crying and pushing away the salad and making movements she wanted to push the salad and soup away as if she was afraid of them.

- 0. Yes?
- And I think Mary Jean Halpenny was there and I asked her what happened and she said look into your salad and I looked into my salad and I saw these pills and she say look into Phyllis' soup. So I did and I saw some pills there.
- Now when you say you looked into your salad did you have to stir it around at all to see the pills?
- Yes, I did. I just stirred it -A. I think by the time I went out it has been stirred many times by the other nurses.
 - I think that's quite likely. 0. Do you know what the pills were in

your salad?

- A. Somebody said it was Inderal.
- Do you recognize them as Q. .

Inderal?





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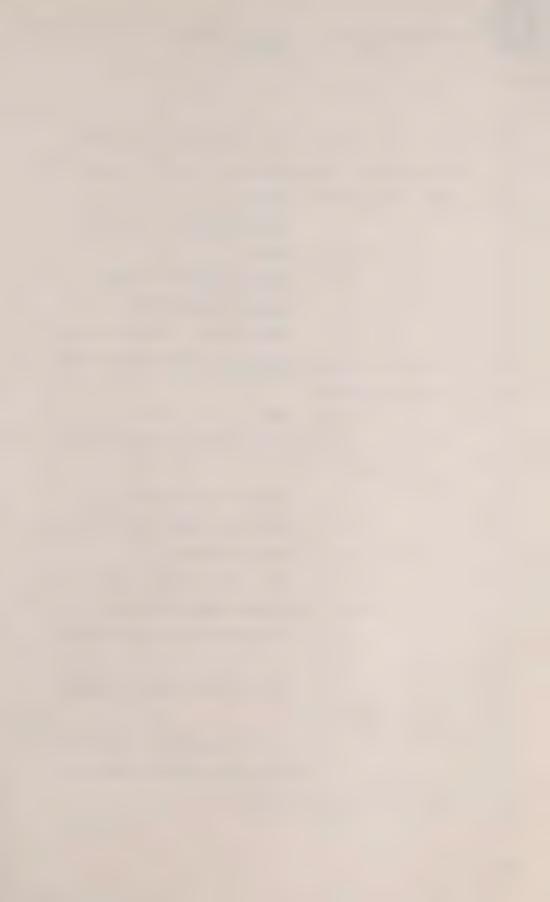
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		Α.	,	I	couldn'	tt:	rec	ogniz	e.	them	but
apparently	y it	is	wri	tten	down.	Tl	he	word	In	deral	. was
written do	own c	on t	he	table	ets.						

- Q. Written on the pill?
- A. Yes.
- Q. What colour were they?
- A. Sort of orangey pink.
- Q. That is why I wanted to know what kind of salad dressing you were eating. They were orangey pink?
 - A. Yes.
- Q. And how many of them did you see in your salad?
 - A. About five or six.
- Q. Were they mushy and dissolved or were they dry or what were they?
- A. No, they were not mushy. They looked as though it had just been put there.
- Q. They were quite dry and whole, were they?
- A. Well, one or two had salad dressing on it.
- Q. Are you satisfied that they had not been there at the time you put the dressing on your salad and mixed it up?





7 8

A. Yes.

MR. ROLAND: I know Mr. Lamek is going to ask for some, and I have two kinds. They are both Propranolol. One has written on it Inderal and it was the kind that was available in the hospital at the time. It is no longer available. There is a different brand name used now, and I have got the other brand as well, called Apotex.

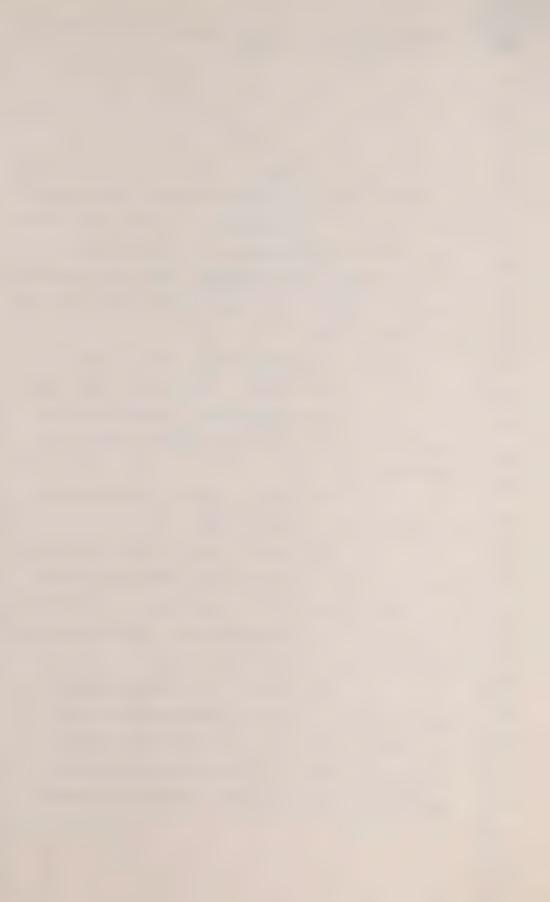
THE COMMISSIONER: Well, I take it -- MR. ROLAND: If Mr. Lamek wants them.

THE COMMISSIONER: He might look at them but I am not sure the new brand is going to be much help to us.

MR. LAMEK: No, if I could have the one that was in use at the time.

MR. ROLAND: That is the 10 milligram size and I think is the size that has been referred to. There is also a 40 milligram size. It is green rather than a sort of pink colour. I don't think that is the one that has been referred to.

MR. LAMEK: Q. What Mr. Roland has provided to me, Mrs. Scott, interestingly enough in a jar marked Boots Drug Stores, are some orangey tablets which even my tired old eyes can see have something written on them and I think it is Inderal.



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Do you recognize those as being tablets of the kind you found in your salad?

- A. Yes.
- Q. Those are they, are they?
- A. Yes.
- Q. Indeed there are six in this

thing and you say you found about half a dozen?

- A. Yes.
- 0. Well, I suppose --

THE COMMISSIONER: What are they

called?

MR. LAMEK: Inderal tablets, 10

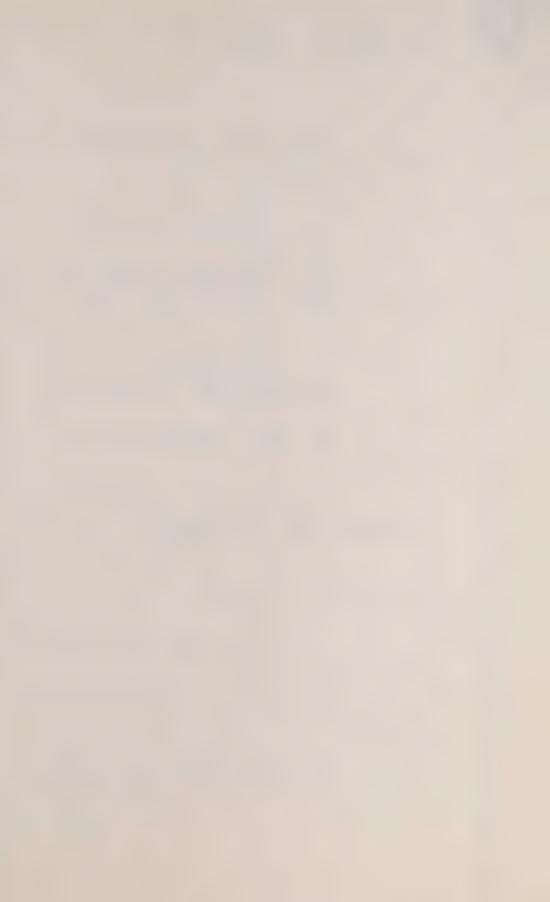
milligrams.

THE COMMISSIONER: Exhibit 384.

- EXHIBIT NO. 384: Inderal tablets, 10 milligram.

MR. LAMEK: Q. Then you say you looked in Mrs. Trayner's soup?

- A. Yes.
- How did you do that? Did you stir that around or did you just --
- Stirred it around with a spoon, A. same spoon.
 - Which same spoon, I am sorry? Q.
 - A. That I had - that I tasted the



soup with.

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Q. Okay. Not the instrument you had stirred your own salad around with?

> A. No.

All right. Did you see pills in Q. that soup?

> Α. Yes.

Q. Same pills that you found, same kind of pills you found in your own salad?

> A. Yes.

0. How many of those did you see approximately?

About four or five.

All right. And you had not seen 0. anything of that sort on the earlier occasion when you looked at Mrs. Trayner's soup before you went out to see the doctor?

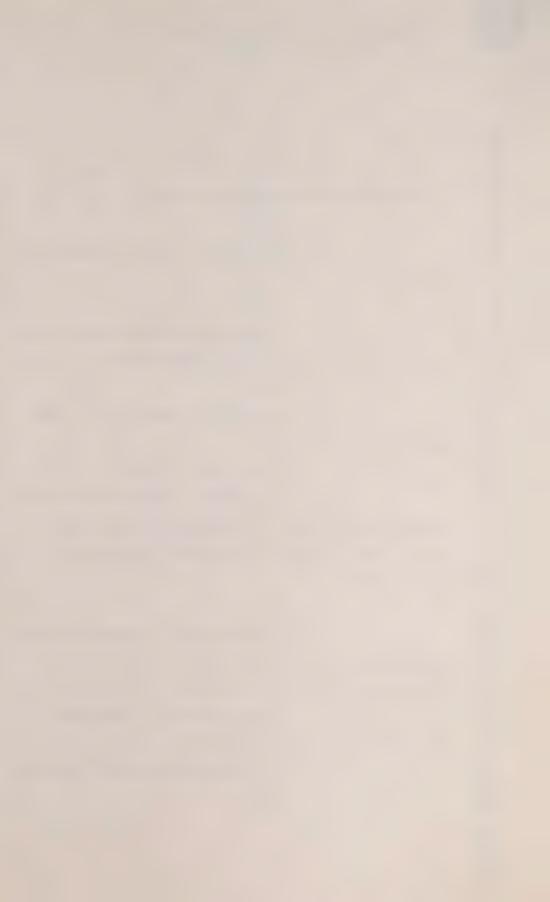
> A. No.

Q. Did those pills appear to be in any advanced state of being dissolved or were they relatively whole or how were they?

They couldn't be; otherwise the girls wouldn't know it was Inderal.

But the soup was cold I take it?

Α. Yes.



went out.

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		Q.		All	right.	They	had	not
dissolved	very	much	I	take	it?			

A. No.

Q. What was your reaction to finding Inderal pills in your salad?

A. Well at that time I thought it was somebody playing a joke on me.

Q. You thought it was a joke?

A. Yes. At that very moment when I

Q. You had the same response to seeing pills in Mrs. Trayner's soup?

A. Yes.

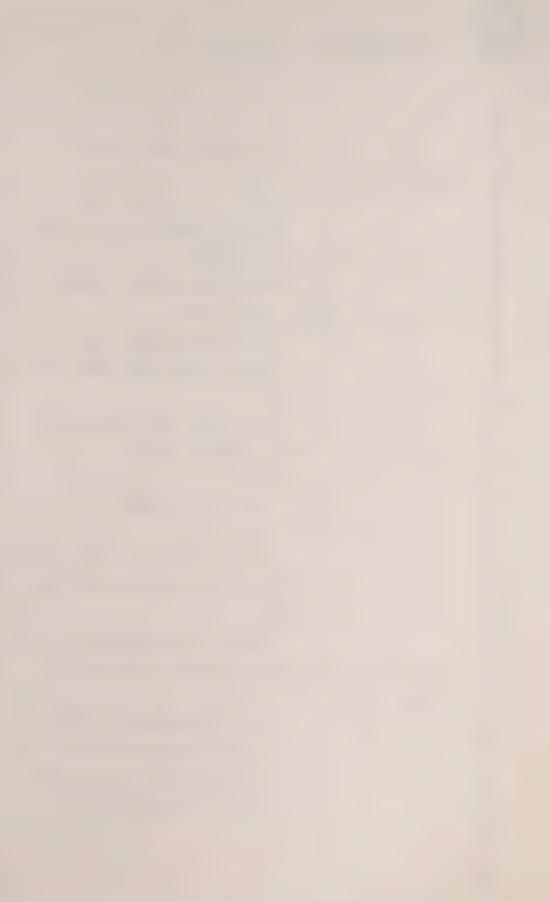
Q. That it was a joke?

A. Yes.

Q. Did it occur to you that she was not treating it as a joke? She appeared to be upset and crying, did she not?

A. Well, it is difficult to tell whether she was upset or not because she cries so often.

- Q. Okay. What happened then?
- A. I think the supervisor came up.
- Q. Do you remember who that was?
- A. I think it was Miss Sword.



Miss Sword?

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down.

- A. Yes.
- Q. What happened when she arrived?
- A. She was trying to calm Phyllis

Q. Yes. Did either of you - did you believe that you had swallowed any of the pills at any time?

A. Well, I thought that, you know - I had coffee so I thought maybe it was something in the coffee too.

Q. Yes. Was any treatment --

THE COMMISSIONER: You had some coffee?
THE WITNESS: Yes, I thought, you know,

the coffee might contain some tablets too.

THE COMMISSIONER: Is this coffee that you had drunk or that you had --

THE WITNESS: The coffee - we always had a pot of coffee.

THE COMMISSIONER: Yes, I am sure, but -THE WITNESS: And I was drinking some
coffee earlier.

THE COMMISSIONER: Yes. I see. And you were afraid that there might be some in the coffee?

THE WITNESS: Yes.



	1									
GG 11	2	MR. LAMEK: Q. You didn't see any								
	3	traces of these or any other kind of pills in the								
	4	coffee?								
	5	A. No.								
	6	Q. Was some kind of treatment given								
	7	to you either at the Hospital for Sick Children or								
	8	anywhere else?								
		A. Well, we had blood taken by the								
	9	resident on call, Dr. Malacky.								
	10	Q. At the Hospital for Sick								
	11	Children?								
	12	A. Yes, in 4A.								
	13	Q. You had blood drawn by the								
	14	resident on call?								
		A. Yes.								
	15	Q. Anything else done for you or to								
	16	you?								
	17	A. By that time Mrs. Padojovski								

Α.

Q. Yes? A. She took us over to TGH. Q. To the Emergency Department at

By that time Mrs. Radojewski

A. Yes.

Q. You received no treatment of any

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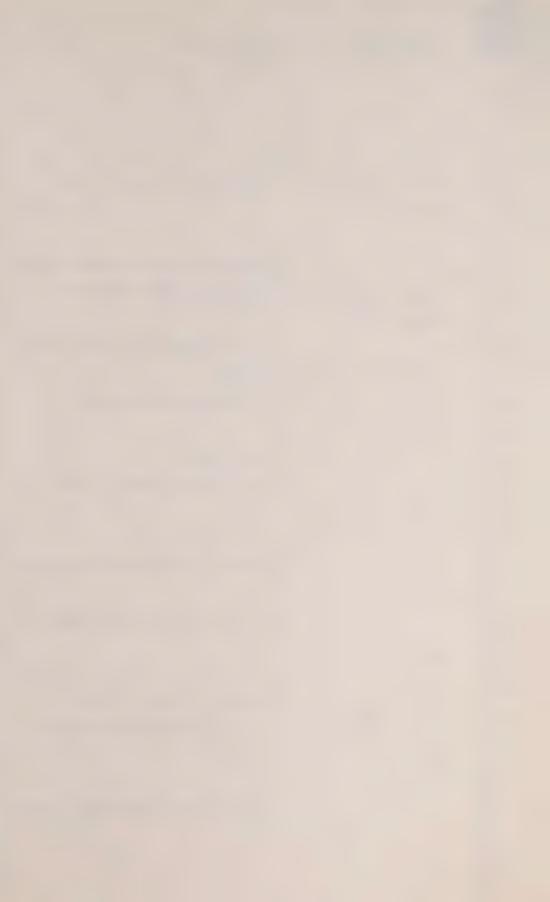
came.

TGH?

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kind at the Hospital for Sick Children?

A.

Q. What happened when you got to the General?

No.

A. Well, we went to the Emergency Desk, and Liz was saying let me do the talking. And she told those nurses there, she said these two nurses accidentally swallowed some pills and they asked what kind of pills and she said they don't know. So by that time they were giving us peculiar looks.

Yes. I can imagine they might But you did not volunteer any further information to the people at the Emergency Department of TGH?

> Α. No. We let Liz do the talking.

0. You let Mrs. Radojewski do all

the talking?

Α. Yes.

And that was the story she gave 0.

to them?

Α. .Yes.

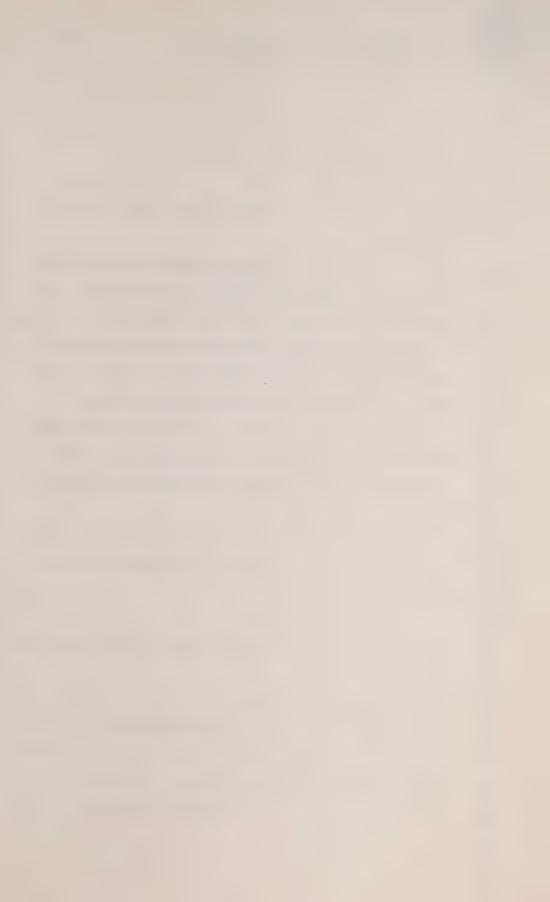
Q. Then what happened?

A. Then we were taken into cubicles and we had our usual signs taken.

> Q. Into separate cubicles?

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taken and --

can only tell

by yourself?

taken and EKG

taken?

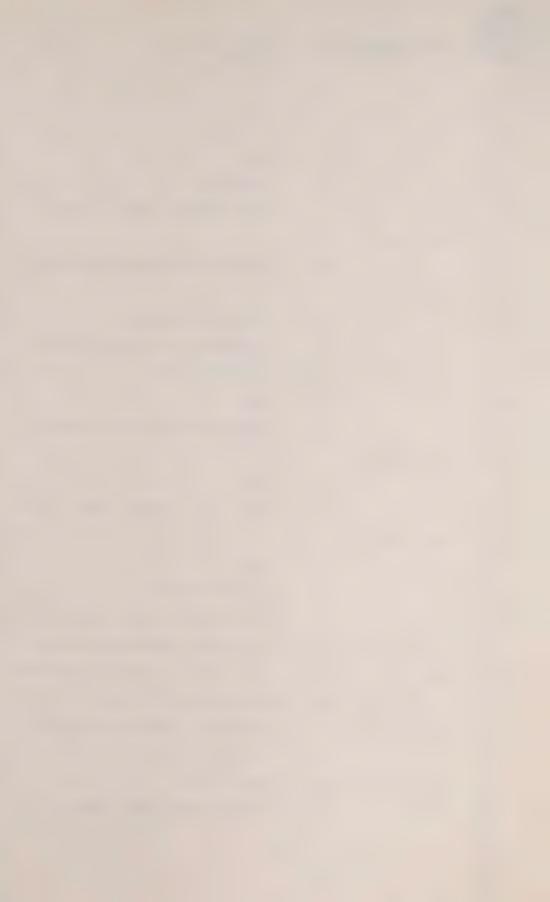
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	Α.	Yes.
	Q.	All right.
	Α.	Then I think we had an EKG
	Q.	You had vital signs and an EKG
	A.	Yes. It was normal.
	Q.	You say we. At this stage you
	me what	happened to you.
	Α.	Yes.
	Q.	Because you were in a cubicle
	Α.	Yes.
	Q.	Okay. You had your vital signs
?		
	Α.	Yes.
	Q.	Anything else?
	Α.	And then she said it would be a

A. And then she said it would be a good idea if you had the stomach pumped and I said, you know, I thought - as I said, I thought I had some in coffee so I went along with that. I wish I didn't, and I had my stomach pumped and I was feeling awful.

Q. I take it that is not a particularly pleasant experience?

A. It would have been much more



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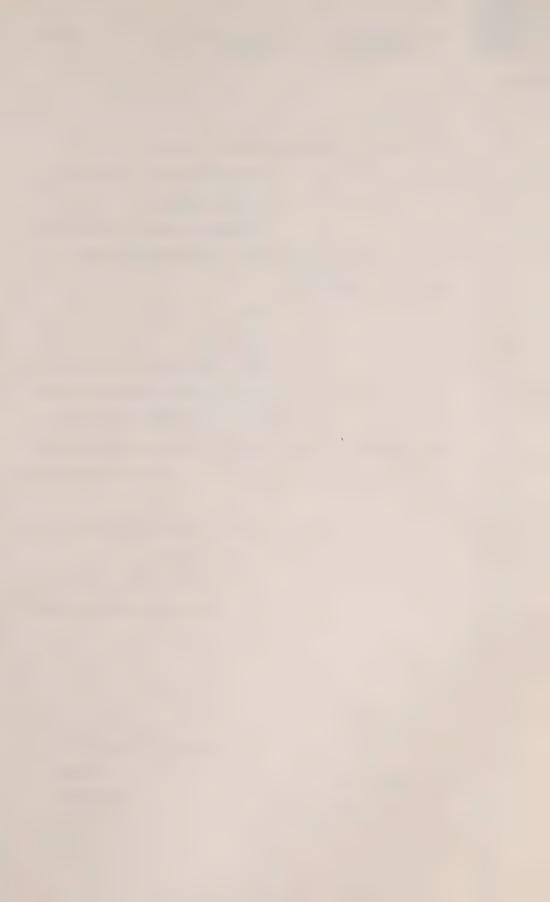
enjoyable if they had given me red wine.

- Q. If they had given you what?
- A. Red wine instead.
- Q. I found that has the same effect on me sometimes! All right, you underwent this unpleasant experience?
 - A. Yes.
 - Q. Then what?
- A. Then I went out of the cubicle and I saw Phyllis sitting there and she was so calm and I was so still feeling sick and I said they finished with you early did you have a stomach pump and she said I don't need one or I don't need to have one.
- Q. Did she say anything else? Did you say anything else at that time?
 - A. No. Then we walked back to 4A.
 - Q. Did you go back on duty that

night?

- A. No.
- Q. You went home?
- A. Went home.
- Q. Just two other things if I may.

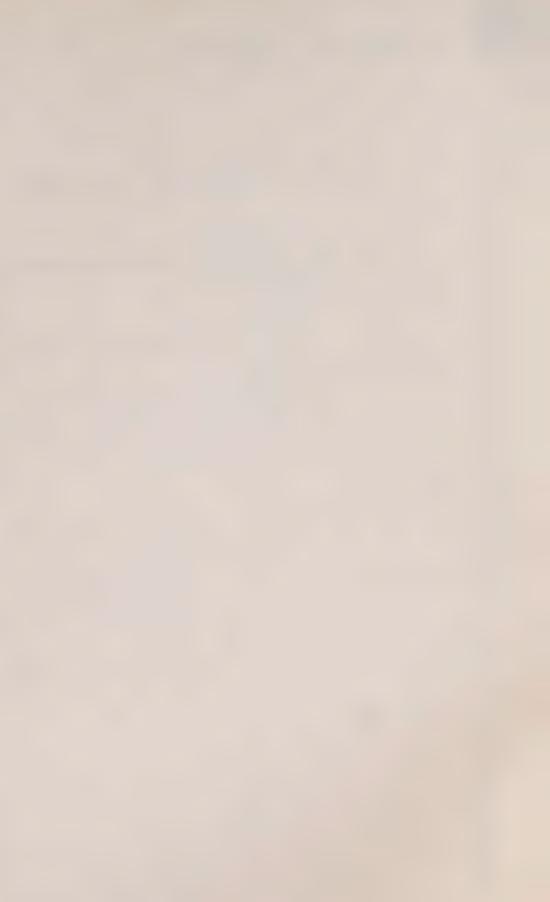
One, going back to the telephone calls. Is your telephone number listed in the Toronto Telephone Directory?



Q. Yes?

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	Α.	Not under my name.
	Q.	Under whose name is your number
listed?		
	Α.	My husband.
	THE CO	OMMISSIONER: Well, your husband
is Mr. Scott I	take i	t?
	THE WI	TNESS: Yes.
	MR. LA	MEK: Q. What are his initials
or what were h	is init	ials?
	THE CO	MMISSIONER: Well, wait a minute.
	MR. LA	MEK: Okay. Well, fair enough.
	Q.	Are they different from your
own?		
	A.	Yes.
	Q.	If I looked for S. K. Scott in
the Toronto te	lephone	book I wouldn't find you?
	Α.	Unless you know his name.
	Q.	Unless I know his name? Fair
enough. You're	e quite	right.
	Do you	know where your telephone number
is available?		
	Α.	In 4A.
	Q.	On 4A?
	Α.	And in Personnel Department.



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	Α.	And	the	Accounts	Department
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0. Can you think of any other place in or out of the hospital where your telephone number, home telephone number, might be known?

> A. No.

Q. Mrs. Scott, did you ever see markings either upon your home or upon your car or upon your locker at the hospital or anything of that sort?

> Once on my locker. A.

0. All right. What was the marking you saw on your locker? At the hospital I take it you mean?

> Α. Yes.

0. What did you see on your locker?

Α. A red cross.

0. Approximately when was that?

Oh I can't tell you when that Α. was but we were working on nights.

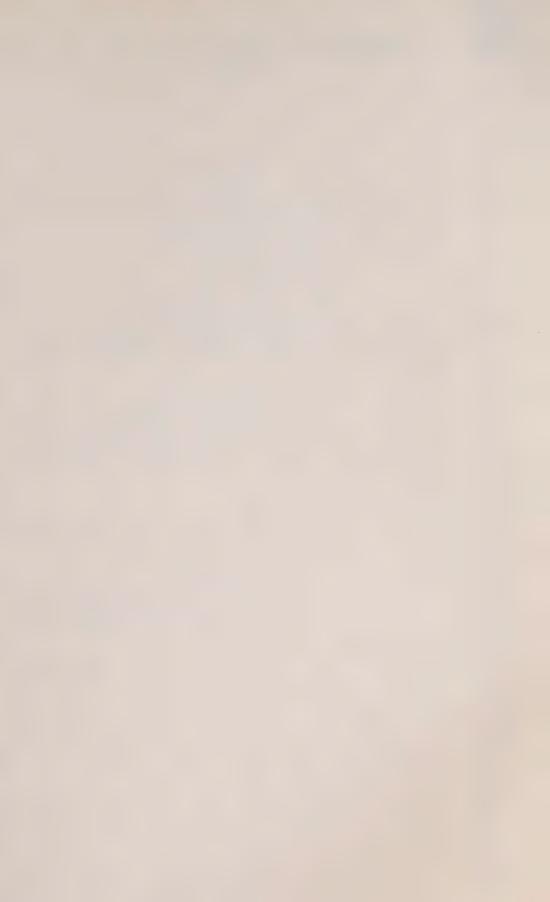
> 0. In the fall of 1981 perhaps?

A. .Yes.

Q. You were working on nights and you saw a red cross marked on your locker?

> Yes. A.

How did it come about that you Q.



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saw that red cross marked on your locker?

A. Earlier on we had a ward clerk --

Q. I am sorry, I missed that.

A. We had a ward clerk working on an evening shift.

Q. A ward clerk?

A. Yes, and apparently she had received a call but she didn't tell anyone about it until --

THE COMMISSIONER: She had a super --

MR. LAMEK: She had received a call.

THE COMMISSIONER: Oh, I see.

THE WITNESS: A threatening phone call.

THE COMMISSIONER: A ward clerk, she

got a phone call?

THE WITNESS: Yes. Apparently she didn't tell us about it until she was getting ready to go home.

MR. LAMEK: Q. She had received a call at the hospital?

A. Yes.

Q. Yes?

A. I don't know what time she received the phone call and I remember Phyllis was angry with her because she didn't let us know



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immediately after she had received the call.

She didn't tell you until she Q. was getting ready to go off duty?

> A. Yes.

0. That would be what, about 10 o'clock at night?

A. Well, she sometimes works late so it would be about 10:30 or quarter to 11:00.

0. All right. Then what happened? What led you to see a cross on your locker door?

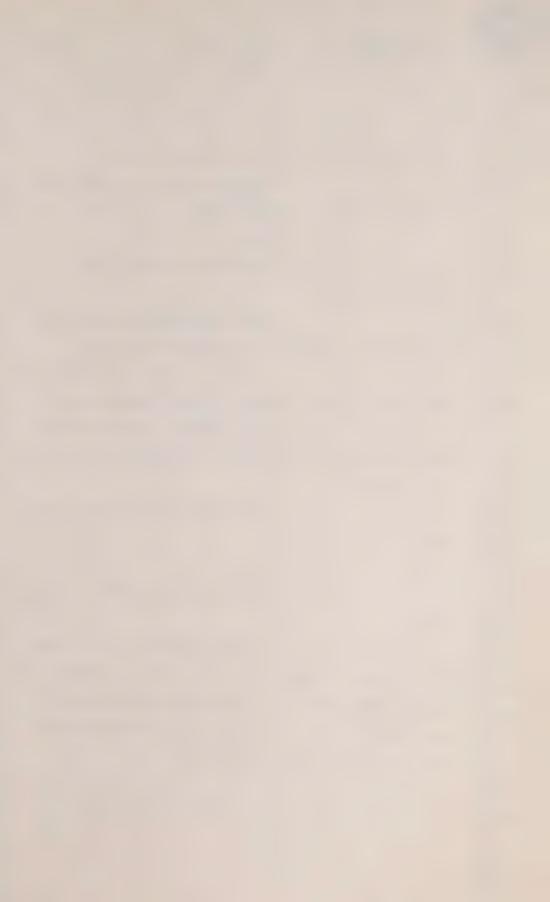
Well, Phyllis suggested that I A. should go down and see whether we have any crosses on our lockers.

> Q. Had she been down did she tell

A. No.

Q. But she suggested that you go

She said why don't you go down to see whether there are any marks on our lockers, to see whether anybody is looking around downstairs in the basement, and I say you expect anybody to look around why don't you go downstairs.



answer?

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Q. Good question. What was the

A. She said she couldn't leave the ward or something like that, so, she suggested it again so I went down.

Q Did you go alone?

A. No.

Q. Who went with you?

A. I took two of the nurses.

Q. All right. And what did you

find?

A. I went to my locker and I saw this cross on my locker. That's the first and last time I had a cross on my locker.

Q. Did you on that occasion look at Mrs. Trayner's locker door?

A. Yes.

Q. Was there any marking on it?

A. No.

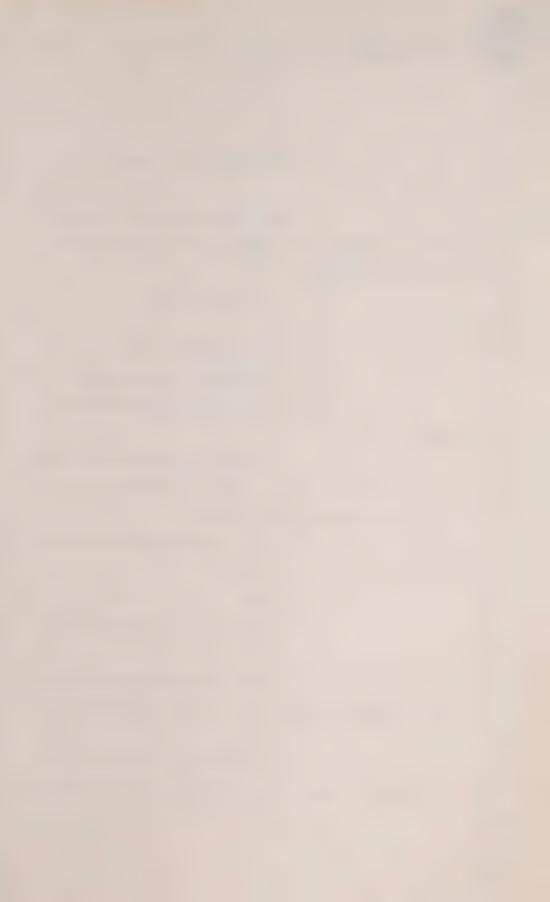
Q. Had you previously heard that

Mrs. Trayner had had marks on her locker door?

A. Yes.

Q. Had you at any time prior to this occasion ever seen a mark on your own locker door?

A. No.



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THE COMMISSIONER: I'm sorry, was it the same day or some other day?

THE WITNESS: Some other day.

THE COMMISSIONER: Some other day.

And you had heard that from whom, from Mrs. Trayner did you?

THE WITNESS: Yes.

THE COMMISSIONER: Yes, whenever you

like, Mr. Lamek?

MR. LAMEK: I think just one last question if I may?

THE COMMISSIONER: Yes, all right.

MR. LAMEK: Q. Mrs. Scott, I certainly don't ask you to speculate or give us any unfounded thoughts or ideas but I do ask you this. Do you now recall ever having seen or heard anything at any time between July 1980 and March 1981 that either then or now in retrospect seems to you odd or unusual or suspicious that might cast some light upon how these children died? As I say, I don't ask you to speculate, I just want you to cast your mind back over events. Is there anything that stands out in your mind as being clearly related or probably related to the deaths of any of these children that you now consider to have been odd or unusual or suspicious?





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Α.	Apart from t	the fact	that they
were all dying on our	team and at	the same	e time and
not on other nights or	with other	teams, t	here is
nothing else I can thi	nk of.		

0. Okay, you have no recollection of seeing anyone doing anything that you think now or thought then perhaps they should not have been doing?

> A. No.

0. Or anything of that sort?

No.

0. Okay.

MR. LAMEK: All right, thank you, Mrs. Scott. I tell you, there is just one matter that I may want to ask a couple of questions about by way of a recap thing tomorrow morning but apart from that those are my questions, thank you.

THE COMMISSIONER: There is no danger of this week, there is no reason to sit early tomorrow, is there?

MR. LAMEK: I don't think there is a need to sit early tomorrow morning, Mr. Commissioner.

THE COMMISSIONER: Have you any idea,

Mr. Rosenberg, how long you will be?

MR. ROSENBERG: I think I will be half



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an hour at the outside if that helps people.

THE COMMISSIONER: Yes. I think I will just leave it at that because I don't think we are in trouble this week.

MR. LAMEK: Thank you, sir.

THE COMMISSIONER: We will rise until

10 o'clock tomorrow morning.

--- Whereupon the hearing adjourned at 4:40 p.m. until 10:00 a.m., Tuesday, March 20th, 1984.



